| Fill in this information to identify your                          | i   |                           |
|--|---|---------------------------|
| United States Bankruptcy Court for the: NORTHERN DISTRICT OF TEXAS |   |                           |
| Case number (if known):  | Chapter you are filing under:  Chapter 7 Chapter 11 Chapter 12 Chapter 13 | ☐ Check if the amended to |

### Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

# Part 1: Identify Yourself

|   | About Debtor 1:                       | About Debtor 2 (Spouse Only in a Joint Case): |
|---|---------------------------------------|---|
| 1. Your full name   |                                       |   |
| Write the name that is on government-issued pictur identification (for example your driver's license or | e Yaireiys<br>First Name              | First Name                                    |
| passport).  | Middle Name                           | Middle Name                                   |
|   | Feria- Martinez                       |   |
| Bring your picture<br>identification to your mee  | Last Name<br>ing                      | Last Name                                     |
| with the trustee.   | Suffix (Sr., Jr., II, III)            | Suffix (Sr., Jr., II, III)                    |
| 2. All other names you  |                                       |   |
| have used in the last 8 years   | First Name                            | First Name                                    |
| Include your married or   | Middle Name                           | Middle Name                                   |
| maiden names.   | Last Name                             | Last Name                                     |
| 3. Only the last 4 digits of  | 4 4 7                                 | 2   |
| your Social Security  | xxx - xx - <u>1</u> <u>1</u> <u>7</u> | 3 xxx - xx                                    |
| number or federal<br>Individual Taxpayer  | OR                                    | OR  |
| Identification number (ITIN)  | 9xx - xx                              | 9xx - xx                                      |

| Debtor 1 Yaire |                    | Yairelys Feria- Ma                             | rtinez                            |  | Case number (if known) |   |  |  |
|----------------|--------------------|--|-----------------------------------|--|------------------------|---|--|--|
|                |                    |  | About Debtor 1:                   | :  | About Debto            | or 2 (Spouse Only in a Joint Case):   |  |  |
| 4.             | and Em             |  | ✓ I have not u                    | ised any business names or EIN   | s. 🔲 I have n          | ot used any business names or EINs.   |  |  |
|                | (EIN) y            | cation Numbers<br>ou have used in<br>t 8 years | Business name                     |  | Business name          |   |  |  |
|                | Include            | trade names and usiness as names               | Business name                     |  | Business name          | -   |  |  |
|                | dollig b           | usiness as names                               | Business name                     |  | Business name          |   |  |  |
|                |                    |  | EIN                               |  | EIN —                  |   |  |  |
|                |                    |  |                                   |  | <u> </u>               |   |  |  |
| 5.             | Where              | you live                                       |                                   |  | If Debtor 2 li         | ves at a different address:   |  |  |
|                |                    |  | 8004 Stowe Spanning Number Street | pring Lane   | Number Stre            | eet   |  |  |
|                |                    |  |                                   |  |                        |   |  |  |
|                |                    |  | Arlington                         | TX 76002   |                        |   |  |  |
|                |                    |  | City                              | State ZIP Code   | City                   | State ZIP Code  |  |  |
|                |                    |  | Tarrant County                    |  | County                 |   |  |  |
|                |                    |  | ·                                 | addus as to different to force   | •                      | and the search of the search  |  |  |
|                |                    |  | the one above,                    | address is different from fill it in here. Note that the ny notices to you at this     | from yours,            | mailing address is different fill it in here. Note that the court notices to you at this mailing  |  |  |
|                |                    |  | Number Street                     |  | Number Stre            | eet   |  |  |
|                |                    |  | P.O. Box                          |  | P.O. Box               |   |  |  |
|                |                    |  | City                              | State ZIP Code   | City                   | State ZIP Code  |  |  |
| 6.             |                    | ou are choosing                                | Check one:                        |  | Check one:             |   |  |  |
|                | this dis<br>bankru | strict to file for<br>ptcy                     | petition, I ha                    | st 180 days before filing this<br>ave lived in this district longer<br>other district. | petition,              | e last 180 days before filing this<br>I have lived in this district longer<br>any other district. |  |  |
|                |                    |  |                                   | her reason. Explain.<br>S.C. § 1408.)  |                        | nother reason. Explain.<br>U.S.C. § 1408.)  |  |  |
| Р              | art 2:             | Tell the Court A                               | bout Your Bankı                   | ruptcy Case  |                        |   |  |  |
| 7.             | Bankru             | apter of the<br>aptcy Code you                 |                                   | a brief description of each, see Norm 2010)). Also, go to the top of                   |                        | 11 U.S.C. § 342(b) for Individuals Filing k the appropriate box.                                  |  |  |
|                | are cho<br>under   | oosing to file                                 | ☑ Chapter 7                       |  |                        |   |  |  |
|                |                    |  | Chapter 11                        |  |                        |   |  |  |
|                |                    |  | Chapter 12                        |  |                        |   |  |  |
|                |                    |  | ☐ Chapter 13                      |  |                        |   |  |  |

| Deb | otor 1 Yairelys Feria- Mar                      | tinez       | Case number (if known)   |  |   |   |                       |
|-----|---|-------------|--|--|---|---|-----------------------|
| 8.  | How you will pay the fee                        | , <u></u>   | court for more deta<br>bay with cash, cas                        | ails about how you may                                   | pay. Typically, if you order. If your attorned                              | ck with the clerk's office in you<br>are paying the fee yourself,<br>by is submitting your payment<br>a pre-printed address.                    | you may               |
|     |   |             |  | fee in installments. If<br>The Filing Fee in Instal      | •   | on, sign and attach the Applic<br>103A).  | ation for             |
|     |   | L E         | By law, a judge mathemath<br>han 150% of the dee in installments | ay, but is not required to official poverty line that    | o, waive your fee, and<br>applies to your family<br>tion, you must fill out | n only if you are filing for Cha<br>d may do so only if your incom<br>y size and you are unable to p<br>the Application to Have the 0<br>ition. | ne is less<br>pay the |
| 9.  | Have you filed for                              | <b>☑</b> 1  | No   |  |   |   |                       |
|     | bankruptcy within the last 8 years?             |             | res.   |  |   |   |                       |
|     |   | Distric     | ot   |  | When  | Case number   |                       |
|     |   | Di-4-i      | -1   |  | MM / DI   | ) / YYYY  |                       |
|     |   | Distri      | л  |  | when<br>MM / DI   | Case number   |                       |
|     |   | Distri      | xt   |  | When  | Case number   |                       |
| 10. | Are any bankruptcy                              | <b>☑</b> ¹  | No   |  | WIW 7 DE  | ,,,,,,  |                       |
|     | cases pending or being filed by a spouse who is |             | es.  |  |   |   |                       |
|     | not filing this case with                       | Debto       | or   |  | R   | elationship to you  |                       |
|     | you, or by a business partner, or by an         | Distri      |  |  |   | Case number,  |                       |
|     | affiliate?                                      |             |  |  |   | O/YYYY if known   |                       |
|     |   | Debto       | ır   |  | R   | elationship to you  |                       |
|     |   | Distri      | xt t   |  |   | Case number,  |                       |
|     |   |             |  |  | MM / DI   | O/YYYY if known   |                       |
| 11. | Do you rent your                                | <b></b> ✓ 1 | No. Go to line 1   | 2.   |   |   |                       |
|     | residence?                                      |             | res. Has your la   | ndlord obtained an evic                                  | tion judgment agains  | et you?   |                       |
|     |   |             |  | to to line 12.   |   |   |                       |
|     |   |             |  | Fill out Initial Statement<br>e it as part of this bankr |   | idgment Against You (Form 1   | U1A)                  |

| Deb | tor 1   | Yairelys Feria- Mar  | tinez |  | Case num   | ber (if known) _                  |                              |                                   |  |
|-----|---|--|-------|--|--|-----------------------------------|------------------------------|-----------------------------------|--|
| P   | art 3:  | Report About Ar  | ıy Bı | ısine  | sses You Own as a Sole Proprietor  |                                   |                              |                                   |  |
| 12. | -   | u a sole proprietor<br>full- or part-time<br>ss?                         |       |  | Go to Part 4.<br>Name and location of business   |                                   |                              |                                   |  |
|     |   | proprietorship is a  |       |  | Alvarez Trucking Name of business, if any  |                                   |                              |                                   |  |
|     | individu<br>separat   | ial, and is not a<br>te legal entity such as<br>tration, partnership, or |       |  | 1417 Atkins Street  Number Street  |                                   |                              |                                   |  |
|     |   |  |       |  | Cedar Hill   | <b>TX</b> State                   | 7510                         | 4                                 |  |
|     | -   | ave more than one oprietorship, use a                                    |       |  | City   | State                             | ZIP Co                       | ode                               |  |
|     | separat   | te sheet and attach it   |       |  | Check the appropriate box to describe your busin   | ness:                             |                              |                                   |  |
|     | to this petition.   |  |       |  | <ul> <li>Health Care Business (as defined in 11 U.S.C. § 101(27A))</li> <li>Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))</li> <li>Stockbroker (as defined in 11 U.S.C. § 101(53A))</li> <li>Commodity Broker (as defined in 11 U.S.C. § 101(6))</li> <li>✓ None of the above</li> </ul> |                                   |                              |                                   |  |
| 13. | Are you filing under<br>Chapter 11 of the<br>Bankruptcy Code and<br>are you a <i>small business</i>   |  |       | <i>set ap</i><br>st rece   | filing under Chapter 11, the court must know wheth<br>propriate deadlines. If you indicate that you are a<br>nt balance sheet, statement of operations, cash-flo<br>f these documents do not exist, follow the procedur  | small business<br>w statement, an | debtor, you<br>id federal in | must attach your scome tax return |  |
|     | debtor?   |  | No.   | I am not filing under Chapter 11.  |  |                                   |                              |                                   |  |
|     | For a definition of small business debtor, see 11 U.S.C. § 101(51D).  |  | No.   | I am filing under Chapter 11, but I am NOT a small business debtor according to the definit the Bankruptcy Code. |  |                                   |                              |                                   |  |
|     |   |  | Yes.  | I am filing under Chapter 11 and I am a small bus<br>Bankruptcy Code.  | siness debtor ac   | cording to t                      | he definition in the         |                                   |  |
| P   | art 4:  | Report If You Ov   | vn oı | Hav  | e Any Hazardous Property or Any Prop   | erty That Ne                      | eds Imm                      | nediate Attention                 |  |
| 14. | Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable  |  |       | No<br>Yes.   | What is the hazard?  |                                   |                              |                                   |  |
|     | hazard to public health or safety? Or do you own any property that needs immediate attention?  For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent |  |       |  | If immediate attention is needed, why is it needed   | <b>i</b> ?                        |                              |                                   |  |
|     |   |  |       |  | Where is the property? Number Street   |                                   |                              |                                   |  |
|     | repairs   | ?  |       |  | City   |                                   | State                        | ZIP Code                          |  |

Debtor 1 Yairelys Feria- Martinez Case number (if known)

### **Explain Your Efforts to Receive a Briefing About Credit Counseling**

 Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

You must check one:

I received a briefing from an approved credit

About Debtor 1:

counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| ☐ I am not required to receive a briefing about |                                  |  |  |  |  |  |
|---|----------------------------------|--|--|--|--|--|
| credit counseling because of:                   |                                  |  |  |  |  |  |
| ☐ Incanacity                                    | I have a mental illness or a mer |  |  |  |  |  |

Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case): You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

# ☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

| Debtor 1 |  | Yairelys Feria- Mart   |      | Case number (if known)            |   |                              |        |  |        |  |
|----------|--|--|------|-----------------------------------|---|------------------------------|--------|--|--------|--|
| P        | art 6:   | Answer These Q   | uest | ions f                            | or Re   | eporting Pu                  | rpos   | ses  |        |  |
| 16.      | What ki<br>have?                                     | nd of debts do you   | 16a. |                                   | ncurre<br>No. (   |                              |        | sumer debts? Consumer de imarily for a personal, family,   |        | re defined in 11 U.S.C. § 101(8) usehold purpose."   |
|          | 16t  |  | 16b. |                                   | money for a business or investment or through the operation of the business or investment.  No. Go to line 16c. |                              |        |  |        |  |
|          |  |  | 16c. | State                             | e the t   | ype of debts yo              | ou owe | e that are not consumer or bus   | siness | s debts.   |
| 17.      | 17. Are you filing under Chapter 7?                  |  |      | No.                               | l am r  | not filing under             | Chap   | ter 7. Go to line 18.  |        |  |
|          | any exe<br>exclude<br>adminis<br>are paid<br>availab | estimate that after empt property is ed and strative expenses d that funds will be le for distribution ocured creditors? | V    | Yes.                              | admir   | •                            | •      | •  | •      | xempt property is excluded and to distribute to unsecured creditors?   |
| 18.      |  | any creditors do<br>imate that you   |      | 1-49<br>50-99<br>100-19<br>200-99 |   |                              |        | 1,000-5,000<br>5,001-10,000<br>10,001-25,000   |        | 25,001-50,000<br>50,001-100,000<br>More than 100,000   |
| 19.      |  | uch do you<br>e your assets to<br>th?  |      |                                   | 01-\$10<br>001-\$5  | 00,000<br>500,000<br>million |        | \$1,000,001-\$10 million<br>\$10,000,001-\$50 million<br>\$50,000,001-\$100 million<br>\$100,000,001-\$500 million |        | \$500,000,001-\$1 billion<br>\$1,000,000,001-\$10 billion<br>\$10,000,000,001-\$50 billion<br>More than \$50 billion |
| 20.      |  | uch do you<br>e your liabilities to  |      |                                   | 01-\$10<br>001-\$5  | 00,000<br>500,000<br>million |        | \$1,000,001-\$10 million<br>\$10,000,001-\$50 million<br>\$50,000,001-\$100 million<br>\$100,000,001-\$500 million |        | \$500,000,001-\$1 billion<br>\$1,000,000,001-\$10 billion<br>\$10,000,000,001-\$50 billion<br>More than \$50 billion |

| Debtor 1 | Yairelys Feria- Ma | artinez  | Case number (if known)   |  |  |  |  |
|----------|--------------------|--|--|--|--|--|--|
| Part 7:  | Sign Below         |  |  |  |  |  |  |
| For you  |                    | I have examined this petition, and I declar and correct.   | e under penalty of perjury that the information provided is true   |  |  |  |  |
|          |                    | am aware that I may proceed, if eligible, under Chapter 7, 11, 12, derstand the relief available under each chapter, and I choose to   |  |  |  |  |  |
|          |                    | If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). |  |  |  |  |  |
|          |                    | I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.   |  |  |  |  |  |
|          |                    | · ·  | ncealing property, or obtaining money or property by fraud in sult in fines up to \$250,000, or imprisonment for up to 20 years, and 3571. |  |  |  |  |
|          |                    | X /s/ Yairelys Feria- Martinez   | x  |  |  |  |  |
|          |                    | Yairelys Feria- Martinez, Debtor 1   | Signature of Debtor 2  |  |  |  |  |
|          |                    | Executed on <b>01/22/2020</b>  | Executed on  |  |  |  |  |

MM / DD / YYYY

MM / DD / YYYY

| Debtor 1    | Yairelys Feria- Ma                       | irtinez  | Case number (if known)  |   |  |  |  |
|-------------|--|--|---|---|--|--|--|
| represented | not represented by<br>y, you do not need | eligibility to proceed under Chapte<br>relief available under each chapte<br>the debtor(s) the notice required b | er for which the person is eligible. I by 11 U.S.C. § 342(b) and, in a case | States Code, and have explained the also certify that I have delivered to |  |  |  |
|             |  | X /s/ Weldon Reed Allmand<br>Signature of Attorney for Debte   |   | pate 01/22/2020<br>MM / DD / YYYY   |  |  |  |
|             |  | Weldon Reed Allmand Printed name  Allmand Law Firm, PLLC Firm Name  860 Airport Freeway, Suite Number Street     | e 401   |   |  |  |  |
|             |  | Hurst<br>City  | TX<br>State   | <b>76054</b> ZIP Code   |  |  |  |
|             |  | Contact phone (214) 265-0  | 123 Email address qu  | estions@allmandlaw.com  |  |  |  |
|             |  | 24027134   |   |   |  |  |  |
|             |  | Bar number   | State   |   |  |  |  |

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

- You are an individual filing for bankruptcy, and
- Your debts are primarily consumer debts.
   Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

# The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 -- Liquidation
- Chapter 11 -- Reorganization
- Chapter 12 -- Voluntary repayment plan for family farmers or fishermen
- Chapter 13 -- Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

#### **Chapter 7: Liquidation**

| + | \$75  | filing fee<br>administrative fee<br>trustee surcharge |
|---|-------|---|
| • | \$335 | total fee   |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that the even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans:
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file Chapter 7 Statement of Your Current Monthly Income (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the Chapter 7 Means Test Calculation (Official Form 122A-2).

If your income is above the median for your state, you must file a second form--the Chapter 7 Means Test Calculation (Official Form 122A-2). The calculations on the form-sometimes called the *Means Test--* deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If your income is more than the median income

for your state of residence and family size, depending on the results of the Means Test, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called exempt property. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on Schedule C: The Property You Claim as Exempt (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### Chapter 11: Reorganization

| + |         | filing fee<br>administrative fee |
|---|---------|----------------------------------|
|   | \$1,717 | total fee                        |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

# Chapter 12: Repayment plan for family farmers or fishermen

\$200 filing fee \$75 administrative fee

\$275 total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

\$235 filing fee \$75 administrative fee \$310 total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers.
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

# Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy\_forms .html#procedure.

# Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury--either orally or in writing--in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on Voluntary Petition for Individuals Filing for Bankruptcy (Official Form 101). To ensure you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together-called a joint case. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days before you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html.

In Alabama and North Carolina, go to:

http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankru ptcyResources/ApprovedCreditAndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

| Fill in this info   | mation to iden  | tify your case  | and this filing:   |  |   |
|---|---|---|--|--|---|
|   | airelys   | tilly your case   | Feria- Martinez  |  |   |
|   | irst Name   | Middle Name   | Last Name  |  |   |
| Debtor 2<br>(Spouse, if filing) F                                     | irst Name   | Middle Name   | Last Name  |  |   |
| United States Bank  | ruptcy Court for the  | : NORTHERN D  | ISTRICT OF TEXAS   |  |   |
| Case number   |   |   |  | <b>-</b>   |   |
| (if known)  |   |   |  |  | if this is an<br>led filing                     |
| Official Form 1   |   |   |  |  | 12/15   |
| the asset in the cate<br>filing together, both<br>sheet to this form. | egory where you the<br>are equally respo<br>On the top of any a | nink it fits best. B<br>nsible for supplyi<br>additional pages, | st an asset only once. If an asset as complete and accurate as particular in the second of the secon | possible. If two married pe<br>space is needed, attach a<br>per (if known). Answer eve | eople are<br>separate<br>ry question.           |
|   |   | · · · · · · · · · · · · · · · · · · ·                           |  |  |   |
| 1. Do you own or  No. Go to   |   | equitable interest  | in any residence, building, land   | , or similar property?   |   |
| <u> </u>  | e is the property?  |   |  |  |   |
|   |   | -   | of your entries from Part 1, incluite that number here   | _  | \$0.00  |
| entities for page   | es you have attach  | ieu ioi Fait i. Wi  | ite that humber here   |  |   |
| Part 2: Desc  | ribe Your Vehi  | cles  |  |  |   |
| -   | _   | •   | n any vehicles, whether they are also report it on Schedule G: Exec  | _  |   |
| 3. Cars, vans, true   | cks, tractors, spor   | t utility vehicles, r   | notorcycles  |  |   |
| No  |   |   |  |  |   |
| <b>∀</b> Yes  |   |   |  |  |   |
| 3.1.  | Nissan  | Who has a<br>Check one  | an interest in the property?   | Do not deduct secured clai<br>amount of any secured clai                               | ms or exemptions. Put the<br>ims on Schedule D: |
| Make:<br>Model:   | Armada  |   | r 1 only   | Creditors Who Have Claim   |   |
| Year:   | 2014  | —— 🔲 Debto  | r 2 only   | Current value of the   | Current value of the                            |
| Approximate mileage   | 200,000   | ш   | r 1 and Debtor 2 only st one of the debtors and another  | entire property?<br>\$8,500.00   | portion you own?<br>\$8,500.00                  |
| Other information:  |   | _ ⊔ос   |  | ψο,οσο.σο  | Ψο,σσσ.σσ                                       |
| 2014 Nissan Arma<br>200,000 miles                                     | ıda   |   | k if this is community property nstructions)   |  |   |

| Deb | tor 1               | Yairelys Fe                    | ria- Martinez  | Case number (if known)           |   |
|-----|---------------------|--------------------------------|--|----------------------------------|---|
| 4.  | Example             |                                | notor homes, ATVs and other recreational vehicles, other   | · ·                              |   |
|     | ✓ No<br>☐ Yes       | ;                              |  |                                  |   |
| 5.  | Add the             | dollar value                   | of the portion you own for all of your entries from Part 2,<br>I have attached for Part 2. Write that number here                    |                                  | \$8,500.00  |
|     |                     | 1                              |  | -                                |   |
| Р   | art 3:              | Describe                       | Your Personal and Household Items  |                                  |   |
| Do  | you own             | or have any l                  | egal or equitable interest in any of the following items?  |                                  | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 6.  | Example             | old goods an<br>es: Major appl | d furnishings<br>iances, furniture, linens, china, kitchenware   |                                  |   |
|     | ☐ No<br>✓ Yes       | . Describe                     | See continuation page(s).  |                                  | \$755.00  |
| 7.  | Electron<br>Example | es: Television                 | s and radios; audio, video, stereo, and digital equipment; cor<br>ections; electronic devices including cell phones, cameras, n      |                                  |   |
|     | ☐ No<br>☑ Yes       | . Describe                     | See continuation page(s).  |                                  | \$300.00  |
| 8.  | Example             | •                              | and figurines; paintings, prints, or other artwork; books, pictur<br>n, or baseball card collections; other collections, memorabilis | •                                | •   |
|     | □ No<br>✓ Yes       | . Describe                     | Books, Family Pictures, Art Objects, CD's. DVD's Collectibles  | Records, Tapes,                  | \$5.00  |
| 9.  |                     | es: Sports, ph                 | s and hobbies otographic, exercise, and other hobby equipment; bicycles, p d kayaks; carpentry tools; musical instruments            | pool tables, golf clubs, skis;   | •   |
|     | ✓ No<br>☐ Yes       | Describe                       |  |                                  |   |
| 10. | Firearm<br>Example  |                                | es, shotguns, ammunition, and related equipment  |                                  | 1   |
|     | ✓ No<br>☐ Yes       | . Describe                     |  |                                  |   |
| 11. | •                   |                                | clothes, furs, leather coats, designer wear, shoes, accessorie   | es                               | -   |
|     | ☐ No<br>☑ Yes       | . Describe                     | Clothing ( 2 Adults, 3 Children)   |                                  | \$300.00  |
| 12. | Jewelry<br>Example  |                                | iewelry, costume jewelry, engagement rings, wedding rings, h   | neirloom jewelry, watches, gems, |   |
|     | ✓ No<br>☐ Yes       | . Describe                     |  |                                  | ]   |

| Deb | Yairelys Feria- Martine   | 2   | Case number (if known)            |  |
|-----|---|---|-----------------------------------|--|
| 13. | Non-farm animals  Examples: Dogs, cats, birds, horse:                 | S   |                                   |  |
|     | ✓ No ☐ Yes. Describe  |   |                                   | ]  |
| 14. | did not list  | d items you did not already list, includi   | ng any health aids you            |  |
|     | ✓ No  Yes. Give specific information                                  |   |                                   | ]  |
| 15. |   | entries from Part 3, including any entri<br>ber here                                    |                                   | \$1,360.00   |
| P   | art 4: Describe Your Final  | ncial Assets  |                                   |  |
| Do  | you own or have any legal or equita                                   | able interest in any of the following?  |                                   | Current value of the portion you own?  Do not deduct secured claims or exemptions. |
| 16. | Cash Examples: Money you have in your petition                        | wallet, in your home, in a safe deposit bo  | x, and on hand when you file your |  |
|     | □ No ☑ Yes  |   | Cash:                             | \$5.00   |
| 17. | Examples: Checking, savings, or of                                    | her financial accounts; certificates of depother similar institutions. If you have mult |                                   |  |
|     | □ No ☑ Yes  | Institution name:   |                                   |  |
|     | 17.1. Checking account:   | Checking account  |                                   | \$320.00   |
|     | 17.2. Savings account:  | Savings account   |                                   | \$0.50   |
| 18. |   | traded stocks<br>accounts with brokerage firms, money ma                                | arket accounts                    |  |
|     | ✓ No ☐ Yes Instituti  | on or issuer name:  |                                   |  |
| 19. | Non-publicly traded stock and into an interest in an LLC, partnership | erests in incorporated and unincorpora<br>, and joint venture                           | ted businesses, including         |  |
|     | <ul><li>No</li><li>Yes. Give specific information about</li></ul>     |   |                                   |  |
|     | them Name of  | of entity:  | % of ownership:                   |  |

| Deb | Tairelys Feria- Martinez Case number (if known)   |   |
|-----|---|---|
| 20. | Government and corporate bonds and other negotiable and non-negotiable instruments  Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders.  Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. |   |
|     | ✓ No  Yes. Give specific information about them Issuer name:  |   |
| 21. | Retirement or pension accounts  Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans   |   |
|     | ✓ No  Yes. List each account separately. Type of account: Institution name:   |   |
| 22. | Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others                  | ;   |
|     | ✓ No  ✓ Yes Institution name or individual:   |   |
| 23. | Institution name or individual:  Annuities (A contract for a specific periodic payment of money to you, either for life or for a number of years  | s)  |
|     | ✓ No  Yes Issuer name and description:  |   |
| 24. | Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tui 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).  | tion program.   |
|     | <ul> <li>✓ No</li> <li>✓ Yes</li> <li>Institution name and description. Separately file the records of any interests.</li> </ul>  | I U.S.C. § 521(c)   |
| 25. | Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit   |   |
|     | ✓ No  Yes. Give specific information about them   |   |
| 26. | Patents, copyrights, trademarks, trade secrets, and other intellectual property;  Examples: Internet domain names, websites, proceeds from royalties and licensing agreements   |   |
|     | ✓ No  Yes. Give specific information about them   |   |
| 27. | Licenses, franchises, and other general intangibles  Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, profession  | nal licenses  |
|     | ✓ No  ☐ Yes. Give specific  |   |
| Mon | information about them ey or property owed to you?  | Current value of the  |
|     |   | portion you own?  Do not deduct secured claims or exemptions. |
| 28. | Tax refunds owed to you   |   |
|     | ☑ No  |   |
|     | Yes. Give specific information about them, including whether  | Federal:  |
|     | you already filed the returns   | State:  |
|     | and the tax years   | Local:  |

| Deb | tor 1 Yairelys Feria- Martinez Case number   | r (if known)                            |
|-----|--|---|
| 29. | Family support  Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce   | settlement, property settlement         |
|     | ✓ No  ☐ Yes. Give specific information   | Alimony                                 |
|     | Tes. Give specific information   | Alimony:  Maintenance:                  |
|     |  | Support:                                |
|     |  | Divorce settlement:                     |
|     |  | Property settlement:                    |
| 30. | Other amounts someone owes you  Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation payments, disability benefits, disabilit | ay, workers'                            |
|     | Yes. Give specific information   |   |
| 31. | Interests in insurance policies  Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowners   | 's, or renter's insurance               |
|     | <ul> <li>No</li> <li>Yes. Name the insurance company of each policy and list its value</li></ul>   | Surrender or refund value:              |
| 32. | Any interest in property that is due you from someone who has died  If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are cu entitled to receive property because someone has died  | rently                                  |
|     | ✓ No ☐ Yes. Give specific information  |   |
| 33. | Claims against third parties, whether or not you have filed a lawsuit or made a demand for Examples: Accidents, employment disputes, insurance claims, or rights to sue  | payment                                 |
|     | ✓ No  Yes. Describe each claim   |   |
| 34. | Other contingent and unliquidated claims of every nature, including counterclaims of the crights to set off claims   | lebtor and                              |
|     | Yes. Describe each claim   |   |
| 35. | Any financial assets you did not already list  |   |
|     | ✓ No ☐ Yes. Give specific information  |   |
| 36. | Add the dollar value of all of your entries from Part 4, including any entries for pages you attached for Part 4. Write that number here   | nave → \$325.50                         |
| Pa  | Describe Any Business-Related Property You Own or Have an Interd   | est In. List any real estate in Part 1. |
| 37. | Do you own or have any legal or equitable interest in any business-related property?   |   |
|     | <ul><li>No. Go to Part 6.</li><li>✓ Yes. Go to line 38.</li></ul>  |   |

| Deb | tor 1         | Yairelys Fe                  | ria- Mart    | inez  |   | _ Case number (if kno      | own)       |   |
|-----|---------------|------------------------------|--------------|---|---|----------------------------|------------|---|
|     |               |                              |              |   |   |                            |            | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 38. | Accoun        | its receivable               | or comm      | issions you alread  | ndy earned  |                            |            |   |
|     | ✓ No<br>☐ Yes | . Describe                   |              |   |   |                            |            |   |
| 39. | Example       | es: Business                 | related co   | , <b>and supplies</b><br>mputers, software,<br>onic devices | , modems, printers, copiers                         | fax machines, rugs, telepl | hones,     |   |
|     | ✓ No<br>☐ Yes | . Describe                   |              |   |   |                            |            |   |
| 40. | Machin        | ery, fixtures,               | equipmer     | nt, supplies you us   | ise in business, and tools                          | of your trade              |            |   |
|     | ☐ No ✓ Yes    | . Describe                   | 1992 Kei     | nwoth (approx. ક  | 500,000 miles)                                      |                            |            | \$5,000.00  |
| 41. | Invento       | ry                           |              |   |   |                            |            |   |
|     | ✓ No<br>☐ Yes | . Describe                   |              |   |   |                            |            |   |
| 42. | Interest      | ts in partners               | ships or jo  | int ventures  |   |                            | '          |   |
|     | ✓ No<br>☐ Yes | Describe                     | . Name of    | entity:   |   | % of o                     | wnership:  |   |
| 43. | Custom        | ner lists, mail              | ing lists, c | or other compilation  | ions  |                            |            |   |
|     | ✓ No<br>☐ Yes | □ No                         | ets include  | personally identi   | tifiable information (as def                        | ined in 11 U.S.C. § 101(41 | A))?       |   |
| 44. | Any bu        | siness-relate                | d property   | you did not alrea   | ady list  |                            |            |   |
|     | ✓ No<br>☐ Yes | . Give specif                | ic informat  | ion.  |   |                            |            |   |
| 45. |               |                              | -            |   | Part 5, including any entri                         |                            | →[         | \$5,000.00  |
| Pá  |               |                              |              |   | ercial Fishing-Related<br>mland, list it in Part 1. | Property You Own           | or Have ar | n Interest In.  |
| 46. | Do you        | own or have                  | any legal    | or equitable inter  | rest in any farm- or comm                           | ercial fishing-related pro | perty?     |   |
|     |               | Go to Part 7<br>Go to line 4 |              |   |   |                            |            |   |

| Deb | tor 1         | Yairelys Feria- N    | Martinez  | Case number (if known)                |   |
|-----|---------------|----------------------|---|---------------------------------------|---|
| 47  | Farm aı       | simala               |   |                                       | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 47. |               |                      | try, farm-raised fish   |                                       |   |
|     | ✓ No<br>☐ Yes |                      |   |                                       | ]   |
| 48. | Crops         | either growing or I  | harvested   |                                       |   |
|     |               | . Give specific      |   |                                       | ]   |
| 49. | Farm ar       | nd fishing equipme   | ent, implements, machinery, fixtures,                             | and tools of trade                    |   |
|     | ✓ No<br>☐ Yes |                      |   |                                       | ]   |
| 50. | Farm ar       | nd fishing supplies  | s, chemicals, and feed  |                                       | -   |
|     | ✓ No<br>☐ Yes |                      |   |                                       | ]   |
| 51. | Any far       | m- and commercia     | al fishing-related property you did no                            | t already list                        |   |
|     |               | . Give specific      |   |                                       | ]   |
| 52. |               |                      | of your entries from Part 6, including that number here           | g any entries for pages you have      | \$0.00  |
| Pá  | art 7:        | Describe All Pr      | operty You Own or Have an In                                      | terest in That You Did Not List Above |   |
| 53. |               |                      | ty of any kind you did not already lis<br>country club membership | 17                                    |   |
|     | ✓ No<br>☐ Yes | . Give specific info | ormation.   |                                       |   |
| 54. | Add the       | dollar value of all  | of your entries from Part 7. Write th                             | at number here                        | \$0.00  |

| Debtor 1               | Yairelys Feria- Martinez                               | Case nu     | umber (if known)             |   |             |
|------------------------|--|-------------|------------------------------|---|-------------|
| Part 8:                | List the Totals of Each Part of this Form              |             |                              |   |             |
| 55. Part 1             | : Total real estate, line 2                            |             | <b>→</b>                     | · | \$0.00      |
| 56. Part 2             | : Total vehicles, line 5                               | \$8,500.00  |                              |   |             |
| 57. Part 3             | : Total personal and household items, line 15          | \$1,360.00  |                              |   |             |
| 58. Part 4             | : Total financial assets, line 36                      | \$325.50    |                              |   |             |
| 59. Part 5             | : Total business-related property, line 45             | \$5,000.00  |                              |   |             |
| 60. Part 6             | : Total farm- and fishing-related property, line 52    | \$0.00      |                              |   |             |
| 61. Part 7             | : Total other property not listed, line 54             | +\$0.00     |                              |   |             |
| 62. Total <sub>l</sub> | personal property. Add lines 56 through 61             | \$15,185.50 | Copy personal property total | + | \$15,185.50 |
| 63. Total              | of all property on Schedule A/B. Add line 55 + line 62 |             |                              |   | \$15,185.50 |

| Del | otor 1 Yairelys Feria- Martinez            | Case number (if known) |
|-----|--|------------------------|
| 6.  | Household goods and furnishings (details): |                        |
|     | Sofa                                       | \$100.00               |
|     | Loveseat                                   | \$50.00                |
|     | Coffee Table                               | \$20.00                |
|     | Dining Table / Chairs                      | \$100.00               |
|     | Refrigerator / Freezer                     | \$120.00               |
|     | Dishes / Flatware                          | \$10.00                |
|     | China / Silverware                         | \$5.00                 |
|     | Pots / Pans / Cookware                     | \$20.00                |
|     | Bed (2)                                    | \$200.00               |
|     | Dressers / Nightstands                     | \$70.00                |
|     | 2 Lamps / Accessories                      | \$60.00                |
| 7.  | Electronics (details):                     |                        |
|     | Television (2)                             | \$200.00               |
|     | Cellular Telephone (2)                     | \$100.00               |

| Debtor 2 (Spouse, if filing) First United States Bankrup Case number (if known)  Official Form 10  Schedule C: Th  Be as complete and acc Using the property you                           | 6C ne Property You curate as possible. If two isted on Schedule A/B: F  | Name Last Name  HERN DISTRICT OF THE CONTROL OF THE | EXAS   | ☐ Check if this is an amended filing   |
|--|---|--|--|--|
| Debtor 2 (Spouse, if filing) First United States Bankrup Case number (if known)  Official Form 10  Schedule C: Th  Be as complete and acc Using the property you space is needed, fill out | Name Middle Notcy Court for the: NORT  6C  ne Property You  curate as possible. If two isted on Schedule A/B: F | Name Last Name  HERN DISTRICT OF THE CONTROL OF THE | _  | amended filing   |
| (Spouse, if filing) First United States Bankrup Case number (if known)  Official Form 10  Schedule C: Th  Be as complete and acc Using the property you space is needed, fill out          | 6C ne Property You curate as possible. If two isted on Schedule A/B: F  | Claim as Exemp   | _  | amended filing   |
| Case number (if known)  Official Form 10  Schedule C: Th  Be as complete and accurate using the property you space is needed, fill out   | 6C ne Property You curate as possible. If two isted on Schedule A/B: F  | Claim as Exemp   | _  | amended filing   |
| Official Form 10 Schedule C: Th  Be as complete and acc Using the property you space is needed, fill out   | curate as possible. If two isted on Schedule A/B: F   | -  | ot   | amended filing   |
| Schedule C: The Be as complete and accurate Using the property you space is needed, fill out   | curate as possible. If two isted on Schedule A/B: F   | -  | ot   | 04/19  |
| Be as complete and acc<br>Using the property you I<br>space is needed, fill out  | curate as possible. If two isted on Schedule A/B: F   | -  | ot   | 04/19  |
| Using the property you space is needed, fill out   | isted on Schedule A/B: F  | married people are filing  |  |  |
| •  | . •   | Property (Official Form 106  | 6A/B) as your source, list th  | responsible for supplying correct information. ne property that you claim as exempt. If more essary. On the top of any additional pages, |
| is to state a specific d<br>exempted up to the an<br>receive certain benefit<br>exemption of 100% of   | ollar amount as exempt<br>nount of any applicable<br>s, and tax-exempt retire<br>fair market value under        | . Alternatively, you may<br>statutory limit. Some ex<br>ment fundsmay be unli<br>a law that limits the exe   | claim the full fair market<br>temptionssuch as those<br>imited in dollar amount. | However, if you claim an<br>lar amount and the value of the  |
| Part 1: Identif  | y the Property You  | Claim as Exempt  |  |  |
| 1. Which set of exer   | nptions are you claiming  | g? Check one only, e   | even if your spouse is filing  | with you.  |
| <u> </u>   | ing state and federal non ing federal exemptions.   | bankruptcy exemptions.<br>11 U.S.C. § 522(b)(2)  | 11 U.S.C. § 522(b)(3)  |  |
| 2. For any property  | you list on Schedule A/I  | B that you claim as exen   | npt, fill in the information   | below.   |
| Brief description of the Schedule A/B that lists   |   | Current value of the portion you own   | Amount of the exemption you claim  | Specific laws that allow exemption   |
|  |   |  | Check only one box for each exemption  |  |
| Brief description:   |   | \$8,500.00   | <b>⋈</b> \$8,500.00  | Tex. Prop. Code §§ 42.001(a),  |
| 2014 Nissan Armada<br>miles)   | a (approx. 200,000  |  | \$8,500.00 100% of fair market value, up to any                                  | 42.002(a)(9)   |
|  |   |  | applicable statutory   |  |
| 2014 Nissan Armada   | 3   |  |  |  |
|  | <b>a</b>  |  | limit  |  |
| 2014 Nissan Armada<br>200,000 miles<br>Line from Schedule A/B  |   |  | limit  |  |
| 200,000 miles  |   | \$100.00   | limit    \$100.00  | Tex. Prop. Code §§ 42.001(a),  |

| Debtor 1      | Yairelys Feri                             | a- Martinez                      | Case number (if known)                     |           |   |   |  |  |
|---------------|---|----------------------------------|--|-----------|---|---|--|--|
| Part 2:       | Additional                                | Page                             |  |           |   |   |  |  |
|               | ription of the pro<br>A/B that lists this | pperty and line on<br>s property | Current value of<br>the portion you<br>own |           | ount of the<br>mption you claim                   | Specific laws that allow exemption            |  |  |
|               |   |                                  | Copy the value from Schedule A/B           |           | ck only one box for<br>h exemption                |   |  |  |
| Brief descri  | •   |                                  | \$50.00                                    |           | \$50.00<br>100% of fair market                    | Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)    |  |  |
| Line from S   | chedule A/B:                              | 6                                |  |           | value, up to any<br>applicable statutory<br>limit |   |  |  |
| Brief descrip | •   |                                  | \$20.00                                    | <b>7</b>  | \$20.00<br>100% of fair market                    | Tex. Prop. Code §§ 42.001(a),<br>42.002(a)(1) |  |  |
| Line from S   | chedule A/B:                              | 6                                |  |           | value, up to any applicable statutory limit       | ( ) ,   |  |  |
| Brief descrip | ption:<br>ble / Chairs                    |                                  | \$100.00                                   | <b>1</b>  | \$100.00<br>100% of fair market                   | Tex. Prop. Code §§ 42.001(a),<br>42.002(a)(1) |  |  |
| Line from S   | chedule A/B:                              | 6                                |  |           | value, up to any applicable statutory limit       |   |  |  |
| Brief descri  | ption:<br>tor / Freezer                   |                                  | \$120.00                                   |           | \$120.00<br>100% of fair market                   | Tex. Prop. Code §§ 42.001(a),<br>42.002(a)(1) |  |  |
| Line from S   | chedule A/B:                              | 6                                |  |           | value, up to any applicable statutory limit       |   |  |  |
| Brief descrip | •   |                                  | \$10.00                                    | <b>1</b>  | \$10.00<br>100% of fair market                    | Tex. Prop. Code §§ 42.001(a),<br>42.002(a)(1) |  |  |
| Line from S   | chedule A/B:                              | 6                                |  |           | value, up to any<br>applicable statutory<br>limit |   |  |  |
| Brief descri  | •   |                                  | \$5.00                                     | <b>V</b>  | \$5.00<br>100% of fair market                     | Tex. Prop. Code §§ 42.001(a),<br>42.002(a)(1) |  |  |
| Line from S   | chedule A/B:                              | 6                                |  |           | value, up to any applicable statutory limit       |   |  |  |
| Brief descri  | ption:<br>ns / Cookware                   |                                  | \$20.00                                    | <b>V</b>  | \$20.00<br>100% of fair market                    | Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)    |  |  |
| Line from S   | chedule A/B:                              | 6                                |  |           | value, up to any applicable statutory limit       |   |  |  |
| Brief descri  | ption:                                    |                                  | \$200.00                                   | $\square$ | \$200.00<br>100% of fair market                   | Tex. Prop. Code §§ 42.001(a),<br>42.002(a)(1) |  |  |
| Line from S   | chedule A/B:                              | 6                                |  |           | value, up to any<br>applicable statutory<br>limit |   |  |  |
| Brief descrip | ption: / Nightstands                      |                                  | \$70.00                                    | <b>Ø</b>  | <b>\$70.00</b><br>100% of fair market             | Tex. Prop. Code §§ 42.001(a),<br>42.002(a)(1) |  |  |
| Line from S   | chedule A/B:                              | 6                                |  | _         | value, up to any<br>applicable statutory<br>limit |   |  |  |

| Debtor 1  | Yairelys Feria- Martinez  | Case number (if known)                     |                                   |  |   |  |
|---|---|--|-----------------------------------|--|---|--|
| Part 2:   | Additional Page   |  |                                   |  |   |  |
| Brief description of the property and line on Schedule A/B that lists this property |   | Current value of<br>the portion you<br>own | Amount of the exemption you claim |  | Specific laws that allow exemption            |  |
|   |   | Copy the value from<br>Schedule A/B        |                                   | eck only one box for<br>h exemption  |   |  |
| -   | ption:  / Accessories  Schedule A/B: 6  | \$60.00                                    |                                   | \$60.00<br>100% of fair market<br>value, up to any                                 | Tex. Prop. Code §§ 42.001(a),<br>42.002(a)(1) |  |
|   |   |  |                                   | applicable statutory limit   |   |  |
| Brief descri  | •   | \$200.00                                   | □                                 | \$200.00<br>100% of fair market  | Tex. Prop. Code §§ 42.001(a),<br>42.002(a)(1) |  |
| Line from S   | Schedule A/B: <b>7</b>  |  |                                   | value, up to any<br>applicable statutory<br>limit                                  |   |  |
| Brief descri  | ption:<br>elephone (2)  | \$100.00                                   | <u> </u>                          | \$100.00<br>100% of fair market  | Tex. Prop. Code §§ 42.001(a),<br>42.002(a)(1) |  |
| Line from S   | Schedule A/B: 7   |  | _                                 | value, up to any<br>applicable statutory<br>limit                                  |   |  |
| DVD's Re  | ption: amily Pictures, Art Objects, CD's. cords, Tapes, Collectibles Schedule A/B:8 | \$5.00                                     |                                   | \$5.00<br>100% of fair market<br>value, up to any<br>applicable statutory<br>limit | Tex. Prop. Code §§ 42.001(a),<br>42.002(a)(1) |  |
| Brief descri  | ption:<br>( 2 Adults, 3 Children)   | \$300.00                                   | Ø                                 | \$300.00<br>100% of fair market  | Tex. Prop. Code §§ 42.001(a),<br>42.002(a)(5) |  |
|   | Schedule A/B: 11  |  | Ц                                 | value, up to any<br>applicable statutory<br>limit                                  | 42.002(a)(3)                                  |  |
| Brief descri  | ption:<br>woth (approx. 500,000 miles)  | \$5,000.00                                 | <u> </u>                          | \$5,000.00<br>100% of fair market  | Tex. Prop. Code §§ 42.001(a),<br>42.002(a)(4) |  |
|   | Schedule A/B: 40  |  | u                                 | value, up to any applicable statutory limit  | , , , ,                                       |  |

IN RE: Yairelys Feria- Martinez CASE NO

CHAPTER 7

Scheme Selected: State

# SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

#### **Exemption Totals by Category:**

(Values and liens of surrendered property are NOT included in this section)

| No. | Category  | Gross<br>Property Value | Total<br>Encumbrances | Total<br>Equity | Total Amount<br>Exempt | Total Amount<br>Non-Exempt |
|-----|---|-------------------------|-----------------------|-----------------|------------------------|----------------------------|
| 1.  | Real property   | \$0.00                  | \$0.00                | \$0.00          | \$0.00                 | \$0.00                     |
| 3.  | Motor vehicles (cars, etc.)                           | \$8,500.00              | \$0.00                | \$8,500.00      | \$8,500.00             | \$0.00                     |
| 4.  | Water/Aircraft, Motor Homes,<br>Rec. veh. and access. | \$0.00                  | \$0.00                | \$0.00          | \$0.00                 | \$0.00                     |
| 6.  | Household goods and furnishings                       | \$755.00                | \$0.00                | \$755.00        | \$755.00               | \$0.00                     |
| 7.  | Electronics   | \$300.00                | \$0.00                | \$300.00        | \$300.00               | \$0.00                     |
| 8.  | Collectibles of value                                 | \$5.00                  | \$0.00                | \$5.00          | \$5.00                 | \$0.00                     |
| 9.  | Equipment for sports and hobbies                      | \$0.00                  | \$0.00                | \$0.00          | \$0.00                 | \$0.00                     |
| 10. | Firearms  | \$0.00                  | \$0.00                | \$0.00          | \$0.00                 | \$0.00                     |
| 11. | Clothes   | \$300.00                | \$0.00                | \$300.00        | \$300.00               | \$0.00                     |
| 12. | Jewelry   | \$0.00                  | \$0.00                | \$0.00          | \$0.00                 | \$0.00                     |
| 13. | Non-farm animals                                      | \$0.00                  | \$0.00                | \$0.00          | \$0.00                 | \$0.00                     |
| 14. | Unlisted pers. and household itemsincl. health aids   | \$0.00                  | \$0.00                | \$0.00          | \$0.00                 | \$0.00                     |
| 16. | Cash  | \$5.00                  | \$0.00                | \$5.00          | \$0.00                 | \$5.00                     |
| 17. | Deposits of money                                     | \$320.50                | \$0.00                | \$320.50        | \$0.00                 | \$320.50                   |
| 18. | Bonds, mutual funds or publicly traded stocks         | \$0.00                  | \$0.00                | \$0.00          | \$0.00                 | \$0.00                     |
| 19. | Non-pub. traded stock and int. in businesses          | \$0.00                  | \$0.00                | \$0.00          | \$0.00                 | \$0.00                     |
| 20. | Govt. and corp. bonds and other instruments           | \$0.00                  | \$0.00                | \$0.00          | \$0.00                 | \$0.00                     |
| 21. | Retirement or pension accounts                        | \$0.00                  | \$0.00                | \$0.00          | \$0.00                 | \$0.00                     |
| 22. | Security deposits and prepayments                     | \$0.00                  | \$0.00                | \$0.00          | \$0.00                 | \$0.00                     |
| 23. | Annuities   | \$0.00                  | \$0.00                | \$0.00          | \$0.00                 | \$0.00                     |
| 24. | Interests in an education IRA                         | \$0.00                  | \$0.00                | \$0.00          | \$0.00                 | \$0.00                     |
| 25. | Trusts, equit. or future int. (not in line 1)         | \$0.00                  | \$0.00                | \$0.00          | \$0.00                 | \$0.00                     |
| 26. | Patents, copyrights, and other intellectual prop.     | \$0.00                  | \$0.00                | \$0.00          | \$0.00                 | \$0.00                     |
| 27. | Licenses, franchises, other general intangibles       | \$0.00                  | \$0.00                | \$0.00          | \$0.00                 | \$0.00                     |
| 28. | Tax refunds owed to you                               | \$0.00                  | \$0.00                | \$0.00          | \$0.00                 | \$0.00                     |

IN RE: Yairelys Feria- Martinez CASE NO

CHAPTER 7

## SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Continuation Sheet # 1

**Exemption Totals by Category:** 

TOTALS:

| , , , , , | es and liens of surrendered property are NO         |                         |                       | T-4-1           | Total America          | Total Amazoni              |
|-----------|---|-------------------------|-----------------------|-----------------|------------------------|----------------------------|
| No.       | Category  | Gross<br>Property Value | Total<br>Encumbrances | Total<br>Equity | Total Amount<br>Exempt | Total Amount<br>Non-Exempt |
| 29.       | Family support                                      | \$0.00                  | \$0.00                | \$0.00          | \$0.00                 | \$0.00                     |
| 30.       | Other amounts someone owes you                      | \$0.00                  | \$0.00                | \$0.00          | \$0.00                 | \$0.00                     |
| 31.       | Interests in insurance policies                     | \$0.00                  | \$0.00                | \$0.00          | \$0.00                 | \$0.00                     |
| 32.       | Any int. in prop. due you from someone who has died | \$0.00                  | \$0.00                | \$0.00          | \$0.00                 | \$0.00                     |
| 33.       | Claims vs. third parties, even if no demand         | \$0.00                  | \$0.00                | \$0.00          | \$0.00                 | \$0.00                     |
| 34.       | Other contin. and unliq. claims of every nature     | \$0.00                  | \$0.00                | \$0.00          | \$0.00                 | \$0.00                     |
| 35.       | Any financial assets you did not already list       | \$0.00                  | \$0.00                | \$0.00          | \$0.00                 | \$0.00                     |
| 38.       | Accounts rec. or commissions you already earned     | \$0.00                  | \$0.00                | \$0.00          | \$0.00                 | \$0.00                     |
| 9.        | Office equipment, furnishings, and supplies         | \$0.00                  | \$0.00                | \$0.00          | \$0.00                 | \$0.00                     |
| 0.        | Mach., fixt., equip., bus. suppl., tools of trade   | \$5,000.00              | \$0.00                | \$5,000.00      | \$5,000.00             | \$0.00                     |
| 1.        | Inventory   | \$0.00                  | \$0.00                | \$0.00          | \$0.00                 | \$0.00                     |
| 2.        | Interests in partnerships or joint ventures         | \$0.00                  | \$0.00                | \$0.00          | \$0.00                 | \$0.00                     |
| 3.        | Customer and mailing lists, or other compilations   | \$0.00                  | \$0.00                | \$0.00          | \$0.00                 | \$0.00                     |
| 4.        | Any business-related property not already listed    | \$0.00                  | \$0.00                | \$0.00          | \$0.00                 | \$0.00                     |
| 17.       | Farm animals  | \$0.00                  | \$0.00                | \$0.00          | \$0.00                 | \$0.00                     |
| 8.        | Cropseither growing or harvested                    | \$0.00                  | \$0.00                | \$0.00          | \$0.00                 | \$0.00                     |
| 19.       | Farm/fishing equip., impl., mach., fixt., tools     | \$0.00                  | \$0.00                | \$0.00          | \$0.00                 | \$0.00                     |
| 50.       | Farm and fishing supplies, chemicals, and feed      | \$0.00                  | \$0.00                | \$0.00          | \$0.00                 | \$0.00                     |
| 51.       | Farm/commercial fishing-related prop. not listed    | \$0.00                  | \$0.00                | \$0.00          | \$0.00                 | \$0.00                     |
| 53.       | Any other property of any kind not already listed   | \$0.00                  | \$0.00                | \$0.00          | \$0.00                 | \$0.00                     |
|           | TOTAL C.  |                         |                       |                 |                        |                            |

\$15,185.50

\$0.00

\$15,185.50

\$14,860.00

\$325.50

IN RE: Yairelys Feria- Martinez CASE NO

CHAPTER 7

## SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Continuation Sheet # 2

#### **Surrendered Property:**

The following property is to be surrendered by the debtor. Although this property is NOT exempt, it is NOT considered "non-exempt" for purposes of this analysis. The below listed items are to be returned to the lienholder.

| Property Description     | Market Value | Lien   | Equity |
|--------------------------|--------------|--------|--------|
| Real Property (None)     |              |        |        |
| Personal Property (None) |              |        |        |
| TOTALS:                  | \$0.00       | \$0.00 | \$0.00 |

#### Non-Exempt Property by Item:

TOTALS:

The following property, or a portion thereof, is non-exempt.

| Property Description | Market Value | Lien   | Equity   | Non-Exempt Amount |
|----------------------|--------------|--------|----------|-------------------|
| Real Property (None) |              |        |          |                   |
| Personal Property    |              |        |          |                   |
| Cash                 | \$5.00       |        | \$5.00   | \$5.00            |
| Checking account     | \$320.00     |        | \$320.00 | \$320.00          |
| Savings account      | \$0.50       |        | \$0.50   | \$0.50            |
| TOTALS:              | \$325.50     | \$0.00 | \$325.50 | \$325.50          |

IN RE: Yairelys Feria- Martinez CASE NO

CHAPTER 7

## SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Continuation Sheet #3

| Summary  |             |
|--|-------------|
| A. Gross Property Value (not including surrendered property)         | \$15,185.50 |
| B. Gross Property Value of Surrendered Property                      | \$0.00      |
| C. Total Gross Property Value (A+B)                                  | \$15,185.50 |
| D. Gross Amount of Encumbrances (not including surrendered property) | \$0.00      |
| E. Gross Amount of Encumbrances on Surrendered Property              | \$0.00      |
| F. Total Gross Encumbrances (D+E)                                    | \$0.00      |
| G. Total Equity (not including surrendered property) / (A-D)         | \$15,185.50 |
| H. Total Equity in surrendered items (B-E)                           | \$0.00      |
| I. Total Equity (C-F)  | \$15,185.50 |
| J. Total Exemptions Claimed  | \$14,860.00 |
| K. Total Non-Exempt Property Remaining (G-J)                         | \$325.50    |

|   | 41   | 415   |                                 |  |   |                                   |
|---|--|---|---------------------------------|--|---|-----------------------------------|
| Debtor 1  | Yairelys   | entify your case:   | Feria- Martinez                 |  |   |                                   |
| Dahtar 2  | First Name   | Middle Name   | Last Name                       |  |   |                                   |
| Debtor 2<br>(Spouse, if filing)   | First Name   | Middle Name   | Last Name                       |  |   |                                   |
| United States Bar   | nkruptcy Court for th  | ne: <b>NORTHERN DI</b>  | ISTRICT OF TEXAS                |  |   |                                   |
| Case number (if known)  |  |   |                                 |  | Check if this is amended filing                       |                                   |
| Official Form   | 106D   |   |                                 |  |   |                                   |
| Schedule D:   | Creditors W  | /ho Have Clai   | ims Secured b                   | y Property   |   | 12/15                             |
| 1. Do any credit  No. Che Yes. Fill   | additional pages, v  | write your name and ecured by your proportion to the continuous tition below.                     | d case number (if kno<br>perty? | wn).   | es, and attach it to thi                              |                                   |
| claim, list the creditor has a  | creditor separately f<br>particular claim, list<br>ible, list the claims | ditor has more than o<br>for each claim. If mo<br>the other creditors in<br>in alphabetical order | re than one<br>n Part 2. As     | Column A  Amount of claim  Do not deduct the value of collateral | Column B Value of collateral that supports this claim | Column C Unsecured portion If any |
| 2.1   |  | Describe the secures the o  | property that                   | \$7,087.00   | \$0.00  | \$7,087.00                        |
| Conns Credit Co<br>Creditor's name<br>3295 College St<br>Number Street                                  | <b>.</b>   | Home Furni  |                                 | <u> </u>   |   |                                   |
| Beaumont City Who owes the det Debtor 1 only Debtor 2 only Debtor 1 and D At least one of to a communit | Debtor 2 only<br>the debtors and and<br>claim relates<br>ty debt         | Continger Unliquidat Disputed Nature of lien An agreer Statutory Judgment Vendor                  | ted  n. Check all that apply    | s mortgage or secured  | car loan)   |                                   |
|   |  |   |                                 |  |   |                                   |

Add the dollar value of your entries in Column A on this page. Write that number here:

\$7,087.00

| Debtor 1 Yairelys Feria- Martinez   |   | _ Case number (if  | known)  |                                   |
|---|---|--|---|-----------------------------------|
| Additional Page Part 1: After listing any entries on the sequentially from the previous   |   | Column A  Amount of claim  Do not deduct the value of collateral | Column B Value of collateral that supports this claim | Column C Unsecured portion If any |
| Conns Credit Corp Creditor's name 3295 College St Number Street  Beaumont TX 77701 City State ZIP Code  Who owes the debt? Check one.  □ Debtor 1 only □ Debtor 2 only □ Debtor 2 only □ At least one of the debtors and another  ▼ Check if this claim relates | Describe the property that secures the claim:  As of the date you file, the claim is: Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as Statutory lien (such as tax lien, medure) Judgment lien from a lawsuit Judgment lien from a lawsuit Other (including a right to offset) | mortgage or secured  | \$0.00  | \$2,335.00                        |
| to a community debt  Date debt was incurred 12/17/2016  | Last 4 digits of account number   | 1 2 1 6  |   |                                   |

Add the dollar value of your entries in Column A on this page. Write that number here:

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$9,422.00

\$2,335.00

|   |   |   |  | 1  |  |                                  |
|---|---|---|--|--|--|----------------------------------|
| Fill in this inf  | ormation to i   | dentify your ca   | ase:   |  |  |                                  |
| Debtor 1  | Yairelys  |   | Feria- Martinez  |  |  |                                  |
|   | First Name  | Middle Name   | Last Name  |  |  |                                  |
| Debtor 2  |   |   |  |  |  |                                  |
| (Spouse, if filing)   | First Name  | Middle Name   | Last Name  |  |  |                                  |
| United States Ba  | nkruptcy Court fo   | r the: <b>NORTHER</b>   | N DISTRICT OF TEXAS  |  |  |                                  |
| Case number   |   |   |  | Г  | ☐ Check if this i                          | s an                             |
| (if known)  |   |   |  | _  | amended filin                              |                                  |
| Official Form   | 106E/F  |   |  |  |  |                                  |
| Schedule E/   | F: Credito  | rs Who Have   | Unsecured Claims   |  |  | 12/15                            |
| Do not include an<br>If more space is n<br>to this page. On t       | y creditors with<br>leeded, copy the<br>the top of any ac                             | partially secured<br>Part you need, fil                                     | nd on Schedule G: Executory Co claims that are listed in Schedule I it out, number the entries in the rite your name and case number ecured Claims   | D: Creditors Who I boxes on the left.                                  | Hold Claims Sec                            | ured by Property.                |
|   |   | y unsecured claim   |  |  |  |                                  |
|   | ·-  | y unsecured clain   | is against you!  |  |  |                                  |
| ✓ No. Go t<br>☐ Yes.  | IU Fail 2.  |   |  |  |  |                                  |
| claim. For ea<br>show both pric<br>more space is<br>claim, list the | ch claim listed, ic<br>ority and nonprior<br>s needed for prior<br>other creditors in | lentify what type of<br>ity amounts. As m<br>ity unsecured claim<br>Part 3. | creditor has more than one priority unclaim it is. If a claim has both prior uch as possible, list the claims in all his, fill out the Continuation Page of instructions for this form in the inst | ity and nonpriority ar<br>phabetical order acc<br>Part 1. If more than | nounts, list that cl<br>ording to the cred | aim here and<br>litor's name. If |
| (i oi aii expiai  | nation of each typ  | oc or claim, see the  | mondenons for this form in the mat   | Total claim  | Priority                                   | Nonpriority                      |
|   |   |   |  |  | amount                                     | amount                           |
| 2.1   |   |   |  |  |  |                                  |
|   |   |   |  |  | -  | _                                |
| Priority Creditor's Nam   | ne  |   | Last 4 digits of account number  |  | _  |                                  |
| Number Street   |   |   | When was the debt incurred?  |  |  |                                  |
| Number Street   |   |   | As of the date you file, the claim   | is: Check all that an  | nnly                                       |                                  |
|   |   |   | Contingent   | is. Officer all that ap  | pry.                                       |                                  |
|   |   |   | Unliquidated   |  |  |                                  |
| City  | State   | ZIP Code  | Disputed   |  |  |                                  |
| Who incurred the  |   |   | Type of PRIORITY unsecured cla   | im:  |  |                                  |
| ☐ Debtor 1 only   |   |   | ☐ Domestic support obligations   | •  |  |                                  |
| Debtor 2 only   |   |   | Taxes and certain other debts  | you owe the governr  | ment                                       |                                  |
| Debtor 1 and E  | Debtor 2 only the debtors and   | another   | Claims for death or personal ir  | jury while you were  |  |                                  |
| 브 &   | claim is for a co   |   | intoxicated  Other. Specify  |  |  |                                  |
| Is the claim subje  |   | amity debt  | ☐ Other, Specify   |  |  |                                  |
| □ No  | or to onder:  |   |  |  |  |                                  |
| Yes   |   |   |  |  |  |                                  |

| Debtor 1  | Yairelys Feria- Martinez  | Case number (if known)  |             |
|---|---|---|-------------|
| Part 2:   | List All of Your NONPRIORIT   | Y Unsecured Claims  |             |
| No Ye  4. List all If a cree type of 6  | of your nonpriority unsecured claims<br>litor has more than one nonpriority unse<br>claim it is. Do not list claims already inc | I claims against you?  Submit this form to the court with your other schedules.  in the alphabetical order of the creditor who holds each claim. cured claim, list the creditor separately for each claim. For each claim listed luded in Part 1. If more than one creditor holds a particular claim, list the othursecured claims, fill out the Continuation Page of Part 2.   | •           |
|   |   |   | Total claim |
| Nonpriority Cre<br>3190 S. Vai  |   | Last 4 digits of account number 4 5 5 9 When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated  | \$1,760.28  |
| At least of Check if Is the claim   | only  | Type of NONPRIORITY unsecured claim:  Student loans  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Services  |             |
| AES/PHEA Nonpriority Cre Attn: Bank Number S PO Box 24  Harrisburg City Who incurre Debtor 1 Debtor 2 Debtor 1 At least of Check if | ditor's Name ruptcy itreet 61  PA 17105 State ZIP Code od the debt? Check one. only   | Last 4 digits of account number 1 5 7 0 When was the debt incurred? 11/2012  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim:  Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Charge Account | \$1,808.00  |

| Debtor 1 Yairelys Feria- Martinez   | Case number (if known)   |             |
|---|--|-------------|
| Part 2: Your NONPRIORITY Unsecu   | red Claims Continuation Page   |             |
| After listing any entries on this page, number the previous page.                 | em sequentially from the   | Total claim |
| 4.3   |  | \$35,846.00 |
| Ally Financial  | Last 4 digits of account number 4 5 0 6  |             |
| Nonpriority Creditor's Name   | When was the debt incurred? 09/02/2017   |             |
| 200 Renaissance Ctr Number Street   | As of the date you file, the claim is: Check all that apply.                   |             |
| Number Street   | _ Contingent   |             |
|   | Unliquidated   |             |
| Detroit MI 40042  | Disputed   |             |
| Detroit         MI         48243           City         State         ZIP Code    | Type of NONDDIODITY uncourred claims   |             |
| Who incurred the debt? Check one.   | Type of NONPRIORITY unsecured claim:  ☐ Student loans                          |             |
| Debtor 1 only   | ☐ Obligations arising out of a separation agreement or divorce                 |             |
| Debtor 2 only   | that you did not report as priority claims                                     |             |
| Debtor 1 and Debtor 2 only  | ☐ Debts to pension or profit-sharing plans, and other similar debts            |             |
| At least one of the debtors and another   | Other. Specify   |             |
| ☐ Check if this claim is for a community debt                                     | Purchase Money   |             |
| Is the claim subject to offset?   |  |             |
| ☑ No<br>□ Yes   |  |             |
|   |  |             |
| 4.4   |  | \$1,179.00  |
| Barclays Bank Delaware  | Last 4 digits of account number 6 6 3 5  |             |
| Nonpriority Creditor's Name   | When was the debt incurred? 04/18/2017   |             |
| 125 S West St<br>Number Street  | As of the date you file, the claim is: Check all that apply.                   |             |
| Number Street   | _ ☐ Contingent   |             |
|   | Unliquidated   |             |
| Wilmington DE 40004   | Disputed   |             |
| Wilmington         DE         19801           City         State         ZIP Code | Type of NONDDIODITY uncestived eleims  |             |
| Who incurred the debt? Check one.   | Type of NONPRIORITY unsecured claim:   |             |
| Debtor 1 only   | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce |             |
| Debtor 2 only   | that you did not report as priority claims                                     |             |
| Debtor 1 and Debtor 2 only  | Debts to pension or profit-sharing plans, and other similar debts              |             |
| At least one of the debtors and another   |  |             |
| Check if this claim is for a community debt                                       | Credit Card  |             |
| Is the claim subject to offset?   |  |             |
| ✓ No ☐ Yes  |  |             |
|   |  |             |
| 4.5   |  | \$2,586.00  |
| Capital One Bank USA N  | Last 4 digits of account number 2 7 2 4  |             |
| Nonpriority Creditor's Name   | When was the debt incurred? 07/29/2014   |             |
| PO Box 85064 Number Street  | As of the date you file, the claim is: Check all that apply.                   |             |
| Trumber Street  | _ ☐ Contingent   |             |
|   | Unliquidated   |             |
| Richmond VA 23285   | Disputed   |             |
| Richmond         VA         23285           City         State         ZIP Code   | Type of NONPRIORITY unsecured claim:   |             |
| Who incurred the debt? Check one.   | <u></u>  |             |
| Debtor 1 only   | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce |             |
| Debtor 2 only   | that you did not report as priority claims                                     |             |
| Debtor 1 and Debtor 2 only  | ☐ Debts to pension or profit-sharing plans, and other similar debts            |             |
| At least one of the debtors and another   | ☑ Other. Specify   |             |
| Check if this claim is for a community debt                                       | Credit Card  |             |
| Is the claim subject to offset?   |  |             |
| ☑ No<br>□ Yes   |  |             |
| 1 1 100   |  |             |

| Debtor 1 Yairelys Feria- Martinez                                   | Case number (if known)  |             |
|---|---|-------------|
| Part 2: Your NONPRIORITY Unsecu                                     | red Claims Continuation Page  |             |
| After listing any entries on this page, number the previous page.   | m sequentially from the   | Total claim |
| 4.6   |   | \$651.00    |
| Credit One Bank NA  | Last 4 digits of account number 7 5 9 7   |             |
| Nonpriority Creditor's Name Attn: Officer or Manager                | When was the debt incurred? 12/04/2017  |             |
| Number Street   | As of the date you file, the claim is: Check all that apply.  |             |
| PO Box 98875  | Contingent  |             |
|   | ☐ Unliquidated ☐ Disputed   |             |
| Las Vegas NV 89193  |   |             |
| City State ZIP Code Who incurred the debt? Check one.               | Type of NONPRIORITY unsecured claim:  |             |
| Debtor 1 only   | Student loans  Obligations origing out of a constration agreement or diverse  |             |
| Debtor 2 only   | <ul> <li>Obligations arising out of a separation agreement or divorce<br/>that you did not report as priority claims</li> </ul> |             |
| Debtor 1 and Debtor 2 only  | Debts to pension or profit-sharing plans, and other similar debts   |             |
| At least one of the debtors and another                             | ☑ Other. Specify  |             |
| Check if this claim is for a community debt                         | Credit Card   |             |
| Is the claim subject to offset?  ✓ No                               |   |             |
| ☐ Yes   |   |             |
|   |   |             |
| 4.7   |   | \$1,625.00  |
| Edc/fortune Real Prop   | Last 4 digits of account number8093_  |             |
| Nonpriority Creditor's Name 7810 N College Cir                      | When was the debt incurred? 05/2019   |             |
| Number Street   | As of the date you file, the claim is: Check all that apply.  |             |
|   |   |             |
|   | ☐ Unliquidated ☐ Disputed   |             |
| North Richland Hills TX 76180                                       | ·<br>   |             |
| City State ZIP Code Who incurred the debt? Check one.               | Type of NONPRIORITY unsecured claim:  |             |
| Debtor 1 only   | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce  |             |
| Debtor 2 only   | that you did not report as priority claims  |             |
| Debtor 1 and Debtor 2 only  At least one of the debtors and another | ☐ Debts to pension or profit-sharing plans, and other similar debts   |             |
| — Observativity the land of the community of the                    | Other. Specify  |             |
| Is the claim subject to offset?                                     | Rental Agreement  |             |
| No  |   |             |
| Yes   |   |             |
| 4.8   |   | ¢4.265.00   |
| Fidelity Creditor Service   | Last 4 digits of account number 9 2 0 2   | \$4,365.00  |
| Nonpriority Creditor's Name   | Last 4 digits of account number 9 2 0 2  When was the debt incurred? 10/2019  |             |
| Attn: Bankruptcy Number Street                                      | As of the date you file, the claim is: Check all that apply.  |             |
| Number Street 441 North Varney Street                               | _ ☐ Contingent  |             |
|   | Unliquidated  |             |
| Burbank CA 91502  | Disputed  |             |
| City State ZIP Code   | Type of NONPRIORITY unsecured claim:  |             |
| Who incurred the debt? Check one.                                   | Student loans   |             |
| ☐ Debtor 1 only ☐ Debtor 2 only                                     | Obligations arising out of a separation agreement or divorce  |             |
| Debtor 1 and Debtor 2 only  | that you did not report as priority claims  |             |
| At least one of the debtors and another                             | ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify  |             |
| Check if this claim is for a community debt                         | Collecting for - URBAN ASSET MANAGEMENT   |             |
| Is the claim subject to offset?                                     |   |             |
| No You  |   |             |
| ☐ Yes   |   |             |

| Debtor 1 Yairelys Feria- Martinez  | Case number (if known)  |             |
|--|---|-------------|
| Part 2: Your NONPRIORITY Unsecu  | red Claims Continuation Page  |             |
| After listing any entries on this page, number the previous page.              | m sequentially from the   | Total claim |
| 4.9  |   | \$1,534.00  |
| Fortiva  | Last 4 digits of account number 4 8 7 9                             |             |
| Nonpriority Creditor's Name  | When was the debt incurred? 12/06/2017                              |             |
| Attn: Bankruptcy Number Street   | As of the date you file, the claim is: Check all that apply.        |             |
| PO Box 105555  | _ ☐ Contingent  |             |
|  | Unliquidated  |             |
| Atlanta CA 20240   | Disputed  |             |
| Atlanta         GA         30348           City         State         ZIP Code | Type of NONPRIORITY unsecured claim:                                |             |
| Who incurred the debt? Check one.  | Student loans   |             |
| Debtor 1 only  | ☐ Obligations arising out of a separation agreement or divorce      |             |
| Debtor 2 only  | that you did not report as priority claims                          |             |
| ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another         | ☐ Debts to pension or profit-sharing plans, and other similar debts |             |
|  | Other. Specify  |             |
| Check if this claim is for a community debt                                    | Credit Card   |             |
| Is the claim subject to offset?  |   |             |
| ☑ No<br>□ Yes  |   |             |
|  |   |             |
| 4.10   |   | \$1,142.00  |
| FORTIVAMC/MABTC/ATLS   | Last 4 digits of account number 0 1 5 1                             |             |
| Nonpriority Creditor's Name  | When was the debt incurred? 12/06/2017                              |             |
| 30/40 GOLF LINKS ROAD  Number Street   | As of the date you file, the claim is: Check all that apply.        |             |
| Number Street  | Contingent  |             |
|  | Unliquidated  |             |
| Middletown NV 40040  | Disputed  |             |
| Middletown NY 10940 City State ZIP Code  | Type of NONDRIORITY upgequired eleims                               |             |
| Who incurred the debt? Check one.  | Type of NONPRIORITY unsecured claim:  ☐ Student loans               |             |
| Debtor 1 only  | ☐ Obligations arising out of a separation agreement or divorce      |             |
| Debtor 2 only  | that you did not report as priority claims                          |             |
| Debtor 1 and Debtor 2 only  At least one of the debtors and another            | Debts to pension or profit-sharing plans, and other similar debts   |             |
| At least one of the debtors and another  | Other. Specify  |             |
| Check if this claim is for a community debt                                    | Credit Card   |             |
| Is the claim subject to offset?  |   |             |
| ✓ No  ✓ Yes  |   |             |
|  |   |             |
| 4.11   |   | \$421.00    |
| Genesis BC/Celtic Bank   | Last 4 digits of account number 0 6 3 2                             |             |
| Nonpriority Creditor's Name  | When was the debt incurred? 12/01/2017                              |             |
| PO Box 84049<br>Number Street  | As of the date you file, the claim is: Check all that apply.        |             |
|  | _ ☐ Contingent  |             |
|  | Unliquidated  |             |
| Columbus GA 31908  | Disputed  |             |
| City State ZIP Code  | Type of NONPRIORITY unsecured claim:                                |             |
| Who incurred the debt? Check one.  | Student loans   |             |
| Debtor 1 only  | ☐ Obligations arising out of a separation agreement or divorce      |             |
| Debtor 2 only  | that you did not report as priority claims                          |             |
| Debtor 1 and Debtor 2 only  At least one of the debtors and another            | ☐ Debts to pension or profit-sharing plans, and other similar debts |             |
|  | ✓ Other. Specify  |             |
| Check if this claim is for a community debt                                    | Credit Card   |             |
| Is the claim subject to offset?  ✓ No  |   |             |
| Yes  |   |             |

| Debtor 1 Yairelys Feria- Martinez  | Case number (if known)   |             |
|--|--|-------------|
| Part 2: Your NONPRIORITY Unsecu  | red Claims Continuation Page   |             |
| After listing any entries on this page, number the previous page.                    | m sequentially from the  | Total claim |
| 4.12   |  | \$857.00    |
| LVNV Funding/Resurgent Capital   | Last 4 digits of account number 3 0 8 2  | · ·         |
| Nonpriority Creditor's Name Attn: Bankruptcy   | When was the debt incurred? 08/2018  |             |
| Number Street  | As of the date you file, the claim is: Check all that apply.   |             |
| PO Box 10497   | Contingent   |             |
|  | ☐ Unliquidated<br>☐ ☐ Disputed   |             |
| Greenville SC 29603  |  |             |
| City State ZIP Code Who incurred the debt? Check one.                                | Type of NONPRIORITY unsecured claim:   |             |
| Debtor 1 only  | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce   |             |
| Debtor 2 only  | that you did not report as priority claims   |             |
| Debtor 1 and Debtor 2 only  At least one of the debtors and another                  | ☐ Debts to pension or profit-sharing plans, and other similar debts  |             |
| At least one of the debtors and another  Check if this claim is for a community debt | ✓ Other. Specify   |             |
| Is the claim subject to offset?  | Collecting for - Credit One Bank NA  |             |
| No No  |  |             |
| Yes  |  |             |
| 4.13   |  | *           |
|  | Lock Addute of consumbation of the Consumbatio | \$1,512.00  |
| Midland Funding Nonpriority Creditor's Name  | Last 4 digits of account number4 _ 9 _ 0 _ 7   |             |
| Attn: Bankruptcy   | When was the debt incurred? 08/2018  |             |
| Number Street 350 Camino De La Reine Ste 100   | As of the date you file, the claim is: Check all that apply.  Contingent   |             |
|  | Unliquidated   |             |
| San Diego CA 92108   | Disputed   |             |
| City State ZIP Code  | Type of NONPRIORITY unsecured claim:   |             |
| Who incurred the debt? Check one.  | Student loans  |             |
| Debtor 1 only Debtor 2 only  | Obligations arising out of a separation agreement or divorce   |             |
| Debtor 2 only  Debtor 1 and Debtor 2 only  | that you did not report as priority claims   |             |
| At least one of the debtors and another  | ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify   |             |
|  | Collecting for - Synchony Bank   |             |
| Is the claim subject to offset?  |  |             |
| No You   |  |             |
| Yes  |  |             |
| 4.14   |  | \$2,750.00  |
| Portfolio Recovery   | Last 4 digits of account number 1 5 5 3  |             |
| Nonpriority Creditor's Name Attn: Bankruptcy   | When was the debt incurred? 08/2018  |             |
| Number Street  | As of the date you file, the claim is: Check all that apply.   |             |
| 120 Corporate Blvd   | _ Contingent   |             |
|  | ☐ Unliquidated<br>☐ ☐ Disputed   |             |
| Norfold VA 23502   |  |             |
| City State ZIP Code  Who incurred the debt? Check one.                               | Type of NONPRIORITY unsecured claim:   |             |
| Debtor 1 only  | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce   |             |
| Debtor 2 only  | that you did not report as priority claims   |             |
| Debtor 1 and Debtor 2 only  At least one of the debtors and another                  | ☐ Debts to pension or profit-sharing plans, and other similar debts  |             |
|  | Other. Specify   |             |
|  | Collecting for -CAPITAL ONE BANK USA N.A.  |             |
| Is the claim subject to offset?  ✓ No  |  |             |
| Yes  |  |             |

| Debtor 1 Yairelys Feria- Martinez                                 | Case number (if known)  |             |
|---|---|-------------|
| Part 2: Your NONPRIORITY Unsecu                                   | red Claims Continuation Page  |             |
| After listing any entries on this page, number the previous page. | m sequentially from the   | Total claim |
| 4.15  |   | \$1,532.00  |
| Portfolio Recovery  | Last 4 digits of account number 8 1 3 0   |             |
| Nonpriority Creditor's Name                                       | When was the debt incurred? 06/2019   |             |
| Attn: Bankruptcy Number Street                                    | As of the date you file, the claim is: Check all that apply.  |             |
| 120 Corporate Blvd  | _ Contingent  |             |
|   | Unliquidated  |             |
| Norfold VA 23502  | Disputed  |             |
| City State ZIP Code   | Type of NONPRIORITY unsecured claim:  |             |
| Who incurred the debt? Check one.                                 | Student loans   |             |
| Debtor 1 only Debtor 2 only                                       | Obligations arising out of a separation agreement or divorce  |             |
| Debtor 1 and Debtor 2 only  | that you did not report as priority claims  |             |
| At least one of the debtors and another                           | Debts to pension or profit-sharing plans, and other similar debts   |             |
| ☐ Check if this claim is for a community debt                     |   |             |
| Is the claim subject to offset?                                   | Concoming for Burolayo Bank Bolawaro  |             |
| ✓ No ☐ Yes  |   |             |
| 4.16  |   | \$516.00    |
| Portfolio Recovery  | Last 4 digits of account number6644   |             |
| Nonpriority Creditor's Name Attn: Bankruptcy                      | When was the debt incurred? 02/2019   |             |
| Number Street   | As of the date you file, the claim is: Check all that apply.  |             |
| 120 Corporate Blvd  | _ Contingent  |             |
|   | Unliquidated Disputed   |             |
| Norfold VA 23502  |   |             |
| City State ZIP Code   | Type of NONPRIORITY unsecured claim:  |             |
| Who incurred the debt? Check one.  Debtor 1 only                  | Student loans   |             |
| Debtor 2 only   | <ul> <li>Obligations arising out of a separation agreement or divorce<br/>that you did not report as priority claims</li> </ul> |             |
| Debtor 1 and Debtor 2 only  | Debts to pension or profit-sharing plans, and other similar debts   |             |
| At least one of the debtors and another                           | Other. Specify  |             |
|   | Collecting for - Sychrony Bank  |             |
| Is the claim subject to offset?                                   |   |             |
| ☑ No  |   |             |
| Yes   |   |             |
| 4.17  |   | \$337.00    |
| SYNCB/Toyrus Nonpriority Creditor's Name                          | Last 4 digits of account number1154_  |             |
| PO Box 965005   | When was the debt incurred? 11/26/2017  |             |
| Number Street   | As of the date you file, the claim is: Check all that apply.  |             |
|   | _ Contingent  |             |
|   | ☐ Unliquidated<br>☐ ☐ Disputed  |             |
| Orlando FL 32896  |   |             |
| City State ZIP Code Who incurred the debt? Check one.             | Type of NONPRIORITY unsecured claim:  |             |
| Debtor 1 only   | Student loans   |             |
| Debtor 2 only   | Obligations arising out of a separation agreement or divorce  |             |
| Debtor 1 and Debtor 2 only  | that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts                   |             |
| At least one of the debtors and another                           | Other. Specify  |             |
| Check if this claim is for a community debt                       | Credit Card   |             |
| Is the claim subject to offset?                                   |   |             |
| No No   |   |             |
| ☐ Yes   |   |             |

| Debtor 1 Yairelys Feria- Martinez                                 | Case number (if known)  |             |
|---|---|-------------|
| Part 2: Your NONPRIORITY Unsecu                                   | red Claims Continuation Page  |             |
| After listing any entries on this page, number the previous page. | m sequentially from the   | Total claim |
| 4.18  |   | \$1,340.00  |
| SYNCB/Walmart DC  | Last 4 digits of account number 5 2 1 8   |             |
| Nonpriority Creditor's Name P.O. Box 965024                       | When was the debt incurred? 12/05/2016  |             |
| Number Street   | As of the date you file, the claim is: Check all that apply.  |             |
|   | _ Contingent  |             |
|   | ☐ Unliquidated ☐ Disputed   |             |
| Orlando FL 32896  | ☐ Disputed  |             |
| City State ZIP Code   | Type of NONPRIORITY unsecured claim:  |             |
| Who incurred the debt? Check one.  Debtor 1 only                  | ☐ Student loans   |             |
| Debtor 2 only   | Obligations arising out of a separation agreement or divorce  |             |
| Debtor 1 and Debtor 2 only  | that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts |             |
| At least one of the debtors and another                           | Other. Specify  |             |
|   | Credit Card   |             |
| Is the claim subject to offset?                                   |   |             |
| ☑ No  |   |             |
| Yes   |   |             |
| 4.19  |   | \$21,570.00 |
| TD Auto Finance   | Last 4 digits of account number 7 6 5 8   |             |
| Nonpriority Creditor's Name                                       | When was the debt incurred? 04/2017   |             |
| Attn: Bankruptcy Number Street                                    | As of the date you file, the claim is: Check all that apply.  |             |
| PO Box 9223   | _ Contingent  |             |
|   | Unliquidated  |             |
| Farmington Hilss MI 48333   | ─ □ Disputed  |             |
| City State ZIP Code   | Type of NONPRIORITY unsecured claim:  |             |
| Who incurred the debt? Check one.                                 | Student loans   |             |
| Debtor 1 only Debtor 2 only                                       | Obligations arising out of a separation agreement or divorce  |             |
| Debtor 1 and Debtor 2 only  | that you did not report as priority claims  |             |
| At least one of the debtors and another                           | ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify                          |             |
| ☐ Check if this claim is for a community debt                     | Cother. Specify  Repo Deficiency  |             |
| Is the claim subject to offset?                                   |   |             |
| ▼ No  |   |             |
| Yes   |   |             |

| Debtor 1 | Yairelys Feria- Martinez                         | Case number (if known) |  |  |  |
|----------|--|------------------------|--|--|--|
| Part 4:  | Add the Amounts for Each Type of Unsecured Claim |                        |  |  |  |

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

|                          |     |  |              | Total claim |
|--------------------------|-----|--|--------------|-------------|
| Total claims from Part 1 | 6a. | Domestic support obligations   | 6a.          | \$0.00      |
| nom runt i               | 6b. | Taxes and certain other debts you owe the government   | 6b.          | \$0.00      |
|                          | 6c. | Claims for death or personal injury while you were intoxicated   | 6c.          | \$0.00      |
|                          | 6d. | Other. Add all other priority unsecured claims. Write that amount here.  | 6d. 👍        | \$0.00      |
|                          | 6e. | <b>Total.</b> Add lines 6a through 6d.   | 6d.          | \$0.00      |
| Total plains             | C.f | Object on the second se | C¢.          | Total claim |
| Total claims from Part 2 | 6f. | Student loans  | 6f.          | \$0.00      |
|                          | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims  | 6g.          | \$0.00      |
|                          | 6h. | Debts to pension or profit-sharing plans, and other similar debts  | 6h.          | \$0.00      |
|                          | 6i. | <b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.  | 6i. <b>+</b> | \$83,331.28 |
|                          | 6j. | Total. Add lines 6f through 6i.  | 6j.          | \$83,331.28 |

| Fill in this inf         | formation to i        | dentify your case:        |  |                         |                              |
|--------------------------|-----------------------|---------------------------|--|-------------------------|------------------------------|
| Debtor 1                 | Yairelys              |                           | Feria- Martinez  |                         |                              |
|                          | First Name            | Middle Name               | Last Name  |                         |                              |
| Debtor 2                 |                       |                           |  |                         |                              |
| (Spouse, if filing)      | First Name            | Middle Name               | Last Name  |                         |                              |
| United States Ba         | inkruptcy Court fo    | or the: NORTHERN D        | ISTRICT OF TEXAS   |                         |                              |
| Case number              |                       |                           |  |                         | Check if this is an          |
| (if known)               |                       |                           |  |                         | amended filing               |
| Official Form Schedule G |                       | y Contracts and           | d Unexpired Leases   | 5                       | 12/1                         |
| correct information      | on. If more spac      | e is needed, copy the     | d people are filing together,<br>additional page, fill it out, nu<br>d case number (if known). |                         | ,                            |
| 1. Do you have           | any executory of      | contracts or unexpired    | leases?  |                         |                              |
| ☑ No. Che                | eck this box and f    | ile this form with the co | urt with your other schedules.   | You have nothing else t | to report on this form.      |
| Yes. Fill                | I in all of the infor | mation below even if the  | e contracts or leases are listed   | d on Schedule A/B: Prop | erty (Official Form 106A/B). |

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of

Person or company with whom you have the contract or lease

executory contracts and unexpired leases.

State what the contract or lease is for

| Fill i         | n this inf                | ormation to                           | identify your case        |   |             |   |
|----------------|---------------------------|---------------------------------------|---------------------------|---|-------------|---|
| Debto          | or 1                      | Yairelys                              |                           | Feria- Martinez                                   |             |   |
|                |                           | First Name                            | Middle Name               | Last Name   |             |   |
| Debto<br>(Spou | or 2<br>use, if filing)   | First Name                            | Middle Name               | Last Name   |             |   |
| Unite          | d States Ba               | nkruptcy Court fo                     | or the: <b>NORTHERN D</b> | ISTRICT OF TEXAS                                  |             |   |
|                | number                    | initiapitoy obditive                  |                           |   |             |   |
| (if kno        |                           |                                       |                           |   |             | Check if this is an amended filing  |
| Offic          | ial Form                  | 106H                                  |                           |   |             |   |
|                |                           | : Your Cod                            | ahtors                    |   |             | 12/ <sup>-</sup>  |
| JUITE          | -duie III                 | . Tour cou                            | entors —                  |   |             | 12/   |
|                | No Yes                    | na, California, Ida                   | you lived in a commu      | • • • •   | territory?  | as a codebtor.)  (Community property states and territories s, Washington, and Wisconsin.)  |
| ✓              | Yes. Did<br>✓ No<br>☐ Yes |                                       | rmer spouse, or legal e   | quivalent live with you a                         | at the time | ?   |
| pe<br>cr       | erson show<br>editor on S | n in line 2 agair<br>Schedule D (Offi | n as a codebtor only if   | that person is a guara<br>dule E/F (Official Forn | antor or co | if your spouse is filing with you. List the osigner. Make sure you have listed the , or <i>Schedule G</i> (Official Form 106G). Use |
|                | Column 1:                 | Your codebtor                         |                           |   | C           | Column 2: The creditor to whom you owe the debt   |
|                |                           |                                       |                           |   |             | Check all schedules that apply:   |
|                | <b>A</b> I                | Vl                                    |                           |   | Ö           | Treek all selfedules that apply.  |
| 3.1            | Alvarez,<br>Name          | randy                                 |                           |   | — c         | Schedule D, line  |
|                | 8004 Sto                  | we Spring Lar<br>Street               | 10                        |   | <u> </u>    | Schedule E/F, line 4.1  |
|                |                           |                                       |                           |   | г           | Schedule G, line  |
|                | Arlington<br>City         | 1                                     | TX<br>State               | <b>76002</b> ZIP Code                             | _           | ADT Security Services   |
| 3.2            | Alvarez,                  | Yandy                                 |                           |   |             | Schedule D, line  |
|                | Name<br>8004 Sto          | we Spring Lar                         | ne                        |   | L           |   |
|                | Number                    | Street                                | -                         |   | — <u> </u>  | <u></u>   |
|                | A!!                       | _                                     | <b>T</b> V                | 70000   | — L         | Schedule G, line  |
|                | Arlingtor<br>City         | 1                                     | TX<br>State               | <b>76002</b> ZIP Code                             | _ ′         |   |

| Debto | Yairelys Feria- Martinez             |             |                       | Case number (if known)                          |
|-------|--------------------------------------|-------------|-----------------------|---|
|       | Additional Page to List              | More Cod    | ebtors                |   |
|       | Column 1: Your codebtor              |             |                       | Column 2: The creditor to whom you owe the debt |
|       |                                      |             |                       | Check all schedules that apply:                 |
| 3.3   | Alvarez, Yandy                       |             |                       | Schedule D, line                                |
|       | Name 8004 Stowe Spring Lane          |             |                       | Schedule E/F, line 4.3                          |
|       | Number Street                        |             |                       | Schedule G, line                                |
|       | Arlington                            | TX          | 76002                 | Ally Financial                                  |
|       | City                                 | State       | ZIP Code              |   |
| 3.4   | Alvarez, Yandy                       |             |                       | Schedule D, line                                |
|       | 8004 Stowe Spring Lane Number Street |             |                       | Schedule E/F, line 4.4                          |
|       | - Oueet                              |             |                       | Schedule G, line                                |
|       | Arlington                            | TX          | 76002                 | Barclays Bank Delaware                          |
|       | City                                 | State       | ZIP Code              |   |
| 3.5   | Alvarez, Yandy Name                  |             |                       | Schedule D, line                                |
|       | 8004 Stowe Spring Lane Number Street |             |                       | Schedule E/F, line 4.5                          |
|       |                                      |             |                       | Schedule G, line                                |
|       | Arlington                            | TX<br>State | 76002                 | Capital One Bank USA N                          |
|       | City                                 |             | ZIP Code              |   |
| 3.6   | Name                                 |             |                       | <b>2.1</b>                                      |
|       | 8004 Stowe Spring Lane Number Street |             |                       | Schedule E/F, line                              |
|       |                                      |             |                       | Schedule G, line                                |
|       | Arlington<br>City                    | TX<br>State | <b>76002</b> ZIP Code | Conns Credit Corp                               |
| 2.7   | Alvarez, Yandy                       | 0.0.0       | 0000                  |   |
| 3.7   | Name                                 |             |                       | Schedule D, line 2.2                            |
|       | 8004 Stowe Spring Lane Number Street |             |                       | Schedule E/F, line                              |
|       |                                      |             |                       | Schedule G, line                                |
|       | Arlington<br>City                    | TX<br>State | <b>76002</b> ZIP Code | Conns Credit Corp                               |
| 3.8   | Alvarez, Yandy                       |             |                       |   |
| 5.0   | Name 8004 Stowe Spring Lane          |             |                       | Schedule D, line                                |
|       | Number Street                        |             |                       | Schedule E/F, line 4.6                          |
|       |                                      |             |                       | Schedule G, line Credit One Bank NA             |
|       | Arlington                            | TX<br>State | 76002                 | ——  |

| Debtor 1 Yairelys Feria- Martinez |                                      |             | Case number (if known) |   |  |  |
|-----------------------------------|--------------------------------------|-------------|------------------------|---|--|--|
|                                   | Additional Page to Lis               | t More Cod  | ebtors                 |   |  |  |
|                                   | Column 1: Your codebtor              |             |                        | Column 2: The creditor to whom you owe the debt |  |  |
|                                   |                                      |             |                        | Check all schedules that apply:                 |  |  |
| 3.9                               | Alvarez, Yandy                       |             |                        | Schedule D, line                                |  |  |
|                                   | 8004 Stowe Spring Lane               |             |                        | Schedule E/F, line 4.7                          |  |  |
|                                   | Number Street                        |             |                        | Schedule G, line                                |  |  |
|                                   | Arlington<br>City                    | TX<br>State | <b>76002</b> ZIP Code  | Edc/fortune Real Prop                           |  |  |
|                                   | ,<br>1                               | State       | ZIP Code               |   |  |  |
| 3.10                              | Alvarez, Yandy Name                  |             |                        | Schedule D, line                                |  |  |
|                                   | 8004 Stowe Spring Lane Number Street |             |                        | Schedule E/F, line 4.8                          |  |  |
|                                   |                                      |             |                        | Schedule G, line                                |  |  |
|                                   | Arlington                            | TX          |                        | Fidelity Creditor Service                       |  |  |
|                                   | City                                 | State       | ZIP Code               |   |  |  |
| 3.11                              | Alvarez, Yandy Name                  |             |                        | Schedule D, line                                |  |  |
|                                   | 8004 Stowe Spring Lane Number Street |             |                        | Schedule E/F, line 4.9                          |  |  |
|                                   |                                      |             |                        | Schedule G, line                                |  |  |
|                                   | Arlington                            | TX          | 76002                  | Fortiva   |  |  |
|                                   | City                                 | State       | ZIP Code               |   |  |  |
| 3.12                              | Alvarez, Yandy Name                  |             |                        | Schedule D, line                                |  |  |
|                                   | 8004 Stowe Spring Lane Number Street |             |                        | Schedule E/F, line 4.10                         |  |  |
|                                   |                                      |             |                        | Schedule G, line                                |  |  |
|                                   | Arlington                            | TX          | 76002                  | FORTIVAMC/MABTC/ATLS                            |  |  |
|                                   | City                                 | State       | ZIP Code               |   |  |  |
| 3.13                              | Alvarez, Yandy Name                  |             |                        | Schedule D, line                                |  |  |
|                                   | 8004 Stowe Spring Lane Number Street |             |                        | Schedule E/F, line 4.11                         |  |  |
|                                   | - Street                             |             |                        | Schedule G, line                                |  |  |
|                                   | Arlington                            | TX          | 76002                  | Genesis BC/Celtic Bank                          |  |  |
|                                   | City                                 | State       | ZIP Code               |   |  |  |
| 3.14                              | Alvarez, Yandy Name                  |             |                        | Schedule D, line                                |  |  |
|                                   | 8004 Stowe Spring Lane               |             |                        | Schedule E/F, line 4.12                         |  |  |
|                                   | Number Street                        |             |                        | Schedule G, line                                |  |  |
|                                   | Arlington                            | TX          | 76002                  | LVNV Funding/Resurgent Capital                  |  |  |
|                                   | City                                 | State       | ZIP Code               |   |  |  |

| Debtor 1 Yaiı      | elys Feria- Martinez   |             |                       | Case number (if known)                          |
|--------------------|------------------------|-------------|-----------------------|---|
| Ad                 | lditional Page to List | More Code   | ebtors                |   |
| Column 1           | : Your codebtor        |             |                       | Column 2: The creditor to whom you owe the debt |
|                    |                        |             |                       | Check all schedules that apply:                 |
| 3.15 Alvarez,      | Yandy                  |             |                       | Schedule D, line                                |
|                    | owe Spring Lane Street |             |                       | Schedule E/F, line 4.13                         |
|                    | Street                 |             |                       | Schedule G, line                                |
| Arlingto<br>City   | n                      | TX<br>State | <b>76002</b> ZIP Code | Midland Funding                                 |
|                    | V                      | Oldio       | 211 0000              |   |
| 3.16 Alvarez,      |                        |             |                       | Schedule D, line                                |
| 8004 Sto<br>Number | owe Spring Lane Street |             |                       | Schedule E/F, line 4.14                         |
|                    |                        |             |                       | Schedule G, line                                |
| Arlingto           | n                      | TX          | 76002                 | Portfolio Recovery                              |
| City               |                        | State       | ZIP Code              |   |
| 3.17 Alvarez,      | Yandy                  |             |                       | Schedule D, line                                |
| 8004 Sto           | owe Spring Lane Street |             |                       | Schedule E/F, line 4.15                         |
| Number             | Street                 |             |                       | Schedule G, line                                |
| Arlingto           | n                      | TX          | 76002                 | Portfolio Recovery                              |
| City               | •                      | State       | ZIP Code              | <del></del>                                     |
| 3.18 Alvarez,      | Yandy                  |             |                       | Schedule D, line                                |
| Name 8004 Sto      | owe Spring Lane        |             |                       |   |
| Number             | Street                 |             |                       |   |
|                    |                        |             |                       | Schedule G, line<br>Portfolio Recovery          |
| Arlingto<br>City   | n                      | TX<br>State | <b>76002</b> ZIP Code | — I ditional recovery                           |
| 3.19 Alvarez,      | Yandy                  |             |                       |   |
| Name               |                        |             |                       | Schedule D, line                                |
| Number             | Street Lane            |             |                       | Schedule E/F, line 4.17                         |
|                    |                        |             |                       | Schedule G, line                                |
| Arlingto<br>City   | n                      | TX<br>State | <b>76002</b> ZIP Code | SYNCB/Toyrus                                    |
| 3.20 Alvarez,      | Yandy                  |             |                       | Schedule D, line                                |
| Name               | owe Spring Lane        |             |                       |   |
| Number             | Street                 |             |                       | Schedule E/F, line 4.18                         |
|                    |                        |             |                       | Schedule G, line SYNCB/Walmart DC               |
| Arlingto           | n                      | TX<br>State | 76002                 |   |

| Debtor | 1 Yairelys Feria- Martinez             | Case number (if known)                          |
|--------|--|---|
|        | Additional Page to List More Codebtors |   |
|        | Column 1: Your codebtor                | Column 2: The creditor to whom you owe the debt |
|        |  | Check all schedules that apply:                 |
| 3.21   | Alvarez, Yandy Name                    | Schedule D, line                                |
|        | 8004 Stowe Spring Lane Number Street   | Schedule E/F, line 4.19                         |
|        |  | Schedule G, line                                |
|        | Arlington TX 76002                     | TD Auto Finance                                 |

| Fill in this info  | rmation to ide   | entify your case:   |  |                  |                                       |  |          |  |  |
|--|--|---|--|------------------|---------------------------------------|--|----------|--|--|
|  |  | many your case.   |  |                  | _                                     |  |          |  |  |
| Debtor 1   | Yairelys First Name                                      | Middle Name   | Feria - Ma<br>Last Name  | artine           |                                       | neck if this is:   |          |  |  |
| Debtor 2   |  |   |  |                  |                                       | An amended filing  |          |  |  |
| (Spouse, if filing)  | First Name   | Middle Name   | Last Name  |                  |                                       |  | ion      |  |  |
| United States Bar  | nkruptcy Court for                                       | the: NORTHERN   | DISTRICT OF TI   | EXAS             | ·                                     | chapter 13 income as of the follo  |          |  |  |
| Case number (if known)   |  |   |  | _                |                                       | MM / DD / YYYY   |          |  |  |
| Official Form  | 106I   |   |  |                  |                                       | WINT DD / TTTT   |          |  |  |
| Schedule I: Y  |  | )   |  |                  |                                       |  | 12/15    |  |  |
| responsible for sup<br>include information<br>about your spouse.<br>your name and case | plying correct in<br>about your spou<br>If more space is | formation. If you are sepai<br>se. If you are sepai<br>s needed, attach a se<br>wn). Answer every o | e married and not<br>rated and your spo<br>eparate sheet to th | filing<br>ouse i | jointly, and you<br>s not filing with | nd Debtor 2), both are equally r spouse is living with you, you, do not include information of any additional pages, write |          |  |  |
| 1. Fill in your emp  |  |   |  |                  |                                       |  |          |  |  |
| information.  If you have mor  | e than one   |   | Debtor 1   |                  |                                       | Debtor 2 or non-filing spouse  | е        |  |  |
| job, attach a se   | parate page E  | mployment status  | ✓ Employed   |                  |                                       | <b>☑</b> Employed  |          |  |  |
| with information<br>additional emplo   | overs.   |   | Not employed  Owner  |                  |                                       | Not employed  Truck Driver   |          |  |  |
| ·  | C  | ccupation   |  |                  |                                       |  |          |  |  |
| Include part-time<br>or self-employee  |  | mployer's name  | Alverez Truck  | ing              |                                       | Alvarez Trucking   |          |  |  |
| Occupation may student or home applies.  | _  | mployer's address   | Number Street  |                  |                                       | Number Street  |          |  |  |
|  |  |   | City   |                  | State Zip Code                        | City State   | Zip Code |  |  |
|  | н  | ow long employed t  | here?  |                  |                                       |  |          |  |  |
| Part 2: Give   | Details Abou   | t Monthly Incom   |  |                  |                                       |  |          |  |  |
|  |  |   |  | ing to           | report for any lir                    | ne, write \$0 in the space. Include yo   | our      |  |  |
| non-filing spouse unl  | ess you are sepa   | rated.  | -  |                  |                                       |  |          |  |  |
|  |  | nore than one employ<br>te sheet to this form.  | er, combine the info   | ormati           | on for all employ                     | ers for that person on the lines belo  | ow. If   |  |  |
|  |  |   |  |                  | For Debtor 1                          | For Debtor 2 or non-filing spouse  |          |  |  |
|  |  | ry, and commission<br>onthly, calculate what  |  | 2.               | \$0.00                                | \$0.00   |          |  |  |
| 3. Estimate and li   | st monthly overt   | ime pay.  |  | 3. +             | \$0.00                                | \$0.00   |          |  |  |

Official Form 106l Schedule I: Your Income page 1

Calculate gross income. Add line 2 + line 3.

\$0.00

\$0.00

| Deb | otor 1  | Yairelys Feria- Martinez   |          | Case num               | nber (if kno | own)                   |     |                         |
|-----|---------|--|----------|------------------------|--------------|------------------------|-----|-------------------------|
|     |         |  |          | For Debtor 1           |              | otor 2 or<br>ng spouse | •   |                         |
|     | Сор     | by line 4 here   | 4.       | \$0.00                 |              | \$0.00                 | _   |                         |
| 5.  | List    | all payroll deductions:  |          |                        |              |                        |     |                         |
|     | 5a.     | Tax, Medicare, and Social Security deductions  | 5a.      | \$0.00                 |              | \$0.00                 |     |                         |
|     | 5b.     | Mandatory contributions for retirement plans   | 5b.      | \$0.00                 |              | \$0.00                 |     |                         |
|     | 5c.     | Voluntary contributions for retirement plans   | 5c.      | \$0.00                 |              | \$0.00                 |     |                         |
|     | 5d.     | Required repayments of retirement fund loans   | 5d.      | \$0.00                 |              | \$0.00                 |     |                         |
|     | 5e.     | Insurance  | 5e.      | \$0.00                 |              | \$0.00                 |     |                         |
|     | 5f.     | Domestic support obligations   | 5f.      | \$0.00                 |              | \$0.00                 |     |                         |
|     | 5g.     | Union dues   | 5g.      | \$0.00                 |              | \$0.00                 |     |                         |
|     | 5h.     | Other deductions. Specify:   | 5h.•     | ÷\$0.00                |              | \$0.00                 |     |                         |
| 6.  |         | I the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5h.  | 6.       | \$0.00                 |              | \$0.00                 |     |                         |
| 7.  | Cald    | culate total monthly take-home pay. Subtract line 6 from line 4.   | 7.       | \$0.00                 |              | \$0.00                 |     |                         |
| 8.  | List    | all other income regularly received:   |          |                        |              |                        |     |                         |
|     | 8a.     | Net income from rental property and from operating a business, profession, or farm   | 8a.      | \$2,336.41             |              | \$0.00                 |     |                         |
|     |         | Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  |          |                        |              |                        |     |                         |
|     | 8b.     | Interest and dividends   | 8b.      | \$0.00                 |              | \$0.00                 |     |                         |
|     | 8c.     | Family support payments that you, a non-filing spouse, or a dependent regularly receive  | 8c.      | \$0.00                 |              | \$0.00                 |     |                         |
|     |         | Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.   |          |                        |              |                        |     |                         |
|     | 8d.     | Unemployment compensation  | 8d.      | \$0.00                 |              | \$0.00                 |     |                         |
|     | 8e.     | Social Security  | 8e.      | \$0.00                 |              | \$0.00                 |     |                         |
|     | 8f.     | Other government assistance that you regularly receive   |          |                        |              |                        |     |                         |
|     |         | Include cash assistance and the value (if known) or any non-<br>cash assistance that you receive, such as food stamps<br>(benefits under the Supplemental Nutrition Assistance Program)<br>or housing subsidies. |          |                        |              |                        |     |                         |
|     |         | Specify:   | 8f.      | \$0.00                 |              | \$0.00                 |     |                         |
|     | 8g.     | Pension or retirement income   | -<br>8g. | \$0.00                 |              | \$0.00                 |     |                         |
|     | 8h.     | Other monthly income.<br>Specify:  | 8h.      |                        |              | \$0.00                 |     |                         |
| 9.  | Add     | l all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.   | 9.       | \$2,336.41             |              | \$0.00                 |     |                         |
|     |         |  |          |                        |              |                        | 1 [ | _                       |
| 10. |         | culate monthly income. Add line 7 + line 9.  the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  | 10.      | \$2,336.41             | ⊦            | \$0.00                 | =   | <u>\$2,336.41</u>       |
| 11  |         | te all other regular contributions to the expenses that you list in S  | chodi    | ulo I                  |              |                        |     |                         |
| ••• | Inclu   | ude contributions from an unmarried partner, members of your households or relatives.  | old, y   | our dependents, you    | roommat      | tes, and ot            | her |                         |
|     | Do r    | not include any amounts already included in lines 2-10 or amounts tha  | it are i | not available to pay e | xpenses l    | isted in Sc            | hed | ule J.                  |
|     | Spe     | cify:  |          |                        |              | 11.                    | +   | \$0.00                  |
| 12. |         | I the amount in the last column of line 10 to the amount in line 11.   |          |                        |              | 12.                    |     | \$2,336.41              |
| 40  | if it a | applies.   |          |                        | ,            |                        |     | Combined monthly income |
| 13. |         | you expect an increase or decrease within the year after you file t  | 1115 10  | 11111 f                |              |                        |     |                         |
|     |         | No. Yes. Explain:  |          |                        |              |                        |     |                         |
|     |         |  |          |                        |              |                        |     |                         |

| Debtor 1 Yairelys Feria- Martinez |                  | Case number (if known) |            |
|-----------------------------------|------------------|------------------------|------------|
| 8a. Attached Statement (Debtor 1) |                  |                        |            |
|                                   | Alverez Trucking |                        |            |
| Gross Monthly Income:             |                  |                        | \$6,131.67 |
| Expense                           | Category         | <u>Amount</u>          |            |
| Rent                              | Business Expense | \$115.00               |            |
| Telephone                         | Business Expense | \$60.00                |            |
| Repairs                           | Business Expense | \$870.83               |            |
| Insurance                         | Business Expense | \$920.00               |            |
| Diesel                            | Business Expense | \$1,245.33             |            |
| Projected Income Tax              | Business Expense | \$584.10               |            |
| Total Monthly Expenses            |                  |                        | \$3,795.26 |
| Net Monthly Income:               |                  |                        | \$2,336.41 |

Official Form 106l Schedule I: Your Income page 3

|     | ill in this inform                                  | ation to iden                       | tify your case:                                |                   |   | l <u>.</u> . |  |          |           |          |
|-----|---|-------------------------------------|--|-------------------|---|--------------|--|----------|-----------|----------|
|     | Debtor 1  | Yairelys<br>First Name              | Middle Name                                    | Feria<br>Last N   | - Martinez<br>ame                               | 🗆 A          | cif this is:<br>an amended fil<br>a supplement s | -        | ostpetiti | on       |
|     | Debtor 2<br>(Spouse, if filing)                     | First Name                          | Middle Name                                    | Last N            | ame   | <b>–</b> c   | hapter 13 expo                                   | enses as | of the    |          |
|     | United States Bankro                                |                                     |  |                   |   | <u>-</u>     |  |          | _         |          |
|     | Case number   | upicy Court for th                  | e. NONTILINAL                                  | <u>ioritior o</u> | I ILXAO   | <sup>№</sup> | /IM / DD / YYY                                   | Y        |           |          |
|     | (if known)  |                                     |  |                   |   |              |  |          |           |          |
| _   | fficial Form 10                                     |                                     |  |                   |   |              |  |          |           |          |
|     | chedule J: Yo                                       |                                     |  |                   |   |              |  |          |           | 12/15    |
| COI | rrect information. If me and case numbe             | more space is r<br>r (if known). Ar | needed, attach anoti<br>nswer every question   | ner sheet to      | ling together, both ar<br>this form. On the top |              |  |          |           |          |
| P   | art 1: Descri                                       | be Your Hous                        | sehold   |                   |   |              |  |          |           |          |
| 1.  | Is this a joint case                                | ?                                   |  |                   |   |              |  |          |           |          |
|     | _ No  | ebtor 2 live in a                   | separate household                             |                   | es for Separate Housel                          | nold of D    | Debtor 2.  |          |           |          |
| 2.  | Do you have depe                                    | =                                   | ] No   |                   | Dependent's relati                              | onshin t     | o Depen  | dent's   | Does d    | ependent |
|     | Do not list Debtor 1 Debtor 2.                      | l and <b>⊻</b>                      | Yes. Fill out this in<br>for each depender     |                   | Dobtor 1 or Dobtor                              |              | age  |          |           | h you?   |
|     | Do not state the de                                 | nondonts!                           |  |                   | Daughter  |              | 13   |          | ✓ Ye      |          |
|     | names.  | pendents                            |  |                   | Daugher   |              | 4  |          | ☐ No      |          |
|     |   |                                     |  |                   | Daughter  |              | 2  |          | ☐ No      | )        |
|     |   |                                     |  |                   |   |              |  |          | ☐ No      |          |
|     |   |                                     |  |                   |   |              |  |          | □ No      |          |
| 3.  | Do your expenses expenses of peop yourself and your | le other than                       | ☑ No<br>□ Yes                                  |                   |   |              |  |          | ☐ Ye      | :5       |
| P   | art 2: Estima                                       | te Your Ongo                        | oing Monthly Ex                                | penses            |   |              |  |          |           |          |
| to  |   | of a date after th                  | ne bankruptcy is file                          | -                 | are using this form as<br>a supplemental Sche   |              |  | -        |           |          |
|     |   |                                     | sh government assi<br>on Schedule I: Your      |                   |   |              | Your   | expense  | s         |          |
| 4.  |   |                                     | penses for your resi<br>d any rent for the gro |                   |   |              | 4.   |          | \$1       | ,625.00  |
|     | If not included in                                  | line 4:                             |  |                   |   |              |  |          |           |          |
|     | 4a. Real estate ta                                  | xes                                 |  |                   |   |              | 4a.  |          |           |          |
|     | 4b. Property, hom                                   | eowner's, or rent                   | er's insurance                                 |                   |   |              | 4b.  |          |           |          |
|     | 4c. Home mainter                                    | nance, repair, an                   | d upkeep expenses                              |                   |   |              | 4c   |          |           |          |
|     | 4d. Homeowner's                                     | association or co                   | ondominium dues                                |                   |   |              | 4d.  |          |           |          |

| Debt | or 1 Yairelys Feria- Martinez   | Case number (if known) |          |
|------|---|------------------------|----------|
|      |   | Your expens            | es       |
| 5.   | Additional mortgage payments for your residence, such as home equity loans  | 5.                     |          |
| 6.   | Utilities:  |                        |          |
|      | 6a. Electricity, heat, natural gas  | 6a                     | \$200.00 |
|      | 6b. Water, sewer, garbage collection  | 6b                     | \$100.00 |
|      | 6c. Telephone, cell phone, Internet, satellite, and cable services  | 6c                     | \$100.00 |
|      | 6d. Other. Specify: Cell Phone  | 6d                     | \$250.00 |
| 7.   | Food and housekeeping supplies  | 7.                     | \$100.00 |
| 8.   | Childcare and children's education costs  | 8.                     |          |
| 9.   | Clothing, laundry, and dry cleaning   | 9.                     | \$15.00  |
| 10.  | Personal care products and services   | 10.                    | \$15.00  |
| 11.  | Medical and dental expenses   | 11                     | \$25.00  |
|      | <b>Transportation.</b> Include gas, maintenance, bus or train fare. Do not include car payments.  | 12.                    | \$175.00 |
|      | Entertainment, clubs, recreation, newspapers, magazines, and books  | 13.                    | \$15.00  |
| 14.  | Charitable contributions and religious donations  | 14.                    |          |
|      | Insurance.  |                        |          |
|      | Do not include insurance deducted from your pay or included in lines 4 or 20.   | 45-                    |          |
|      | 15a. Life insurance   | 15a                    |          |
|      | 15b. Health insurance   | 15b                    |          |
|      | 15c. Vehicle insurance  | 15c                    | \$150.00 |
|      | 15d. Other insurance. Specify:  Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  | 15d                    |          |
| 10.  | Specify:  | 16.                    |          |
| 17.  | Installment or lease payments:  |                        |          |
|      | 17a. Car payments for Vehicle 1 Car Payment   | 17a                    | \$657.00 |
|      | 17b. Car payments for Vehicle 2   | 17b                    |          |
|      | 17c. Other. Specify:  | 17c                    |          |
|      | 17d. Other. Specify:  | 17d                    |          |
|      | Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18.                    |          |
|      | Other payments you make to support others who do not live with you.  Specify:   | 19.                    |          |

| Deb | tor 1    | Yairelys Feria- Martinez  | Case number (if known | )            |
|-----|----------|---|-----------------------|--------------|
| 20. |          | r real property expenses not included in lines 4 or 5 of this form or on dule I: Your Income.   |                       |              |
|     | 20a.     | Mortgages on other property   | 20a.                  |              |
|     | 20b.     | Real estate taxes   | 20b.                  |              |
|     | 20c.     | Property, homeowner's, or renter's insurance  | 20c.                  |              |
|     | 20d.     | Maintenance, repair, and upkeep expenses  | 20d.                  |              |
|     | 20e.     | Homeowner's association or condominium dues   | 20e.                  |              |
| 21. | Other    | r. Specify:   | 21. +                 |              |
| 22. | Calcu    | alate your monthly expenses.  | _                     |              |
|     | 22a.     | Add lines 4 through 21.   | 22a.                  | \$3,427.00   |
|     | 22b.     | Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-  | -2. 22b.              |              |
|     | 22c.     | Add line 22a and 22b. The result is your monthly expenses.  | 22c.                  | \$3,427.00   |
| 23. | Calcu    | ulate your monthly net income.  |                       |              |
|     | 23a.     | Copy line 12 (your combined monthly income) from Schedule I.  | 23a.                  | \$2,336.41   |
|     | 23b.     | Copy your monthly expenses from line 22c above.   | 23b. <b>_</b>         | \$3,427.00   |
|     | 23c.     | Subtract your monthly expenses from your monthly income. The result is your monthly net income.   | 23c.                  | (\$1,090.59) |
| 24. | Do yo    | ou expect an increase or decrease in your expenses within the year after y  | ou file this form?    |              |
|     |          | xample, do you expect to finish paying for your car loan within the year or do yo ent to increase or decrease because of a modification to the terms of your mort | . ,                   |              |
|     | <b>1</b> | No.   |                       |              |
|     | □ `      | Yes. Explain here: None.  |                       |              |
|     |          |   |                       |              |
|     |          |   |                       |              |

|                             |  |   |  | •  |                                 |
|-----------------------------|--|---|--|--|---------------------------------|
| Fill in th                  | is information to i                              | dentify your case                             | :  | 4  |                                 |
| Debtor 1                    | Yairelys First Name                              | Middle Name                                   | Feria- Martinez  Last Name                                       |  |                                 |
| Debtor 2                    |  |   |  |  |                                 |
|                             | filing) First Name                               | Middle Name                                   | Last Name  |  |                                 |
| United Stat                 | tes Bankruptcy Court fo                          | or the: NORTHERN D                            | ISTRICT OF TEXAS   |  |                                 |
| Case numb                   | per  |   |  | ☐ Chack i  | if this is an                   |
| (if known)                  |  |   |  | amende   |                                 |
| Official F                  | orm 106Sum                                       |   |  |  |                                 |
| Summa                       | ry of Your Ass                                   | ets and Liabilit                              | ies and Certain Stat   | istical Information  | 12/1                            |
| correct info                | rmation. Fill out all of                         | your schedules first;<br>inal forms, you must | then complete the informatio                                     | both are equally responsible for on this form. If you are filing neck the box at the top of this | g amended                       |
|                             |  |   |  |  | Your assets                     |
| 1. Schedu                   | ıle A/B: Property (Offici                        | al Form 106A/B)                               |  |  | Value of what you own           |
| 1a. Co                      | ppy line 55, Total real e                        | state, from Schedule A                        | /B   |  | \$0.00                          |
|                             |  | ,   |  |  |                                 |
| 1b. Co                      | ppy line 62, Total person                        | nal property, from Sche                       | edule A/B  |  | \$15,185.50                     |
|                             |  |   | _  |  | \$15,185.50                     |
| 1c. Co                      | ppy line 63, Total of all p                      | oroperty on Schedule A                        | /B   |  | \$15,165.50                     |
| Part 2:                     | Summarize You                                    | r Liabilities                                 |  |  |                                 |
|                             |  |   |  |  | Your liabilities Amount you owe |
|                             |  | •   | Property (Official Form 106D) f claim, at the bottom of the last | page of Part 1 of Schedule D   | \$9,422.00                      |
|                             |  |   | s (Official Form 106E/F)<br>ured claims) from line 6e of Sch     | edule E/F  | \$0.00                          |
| 3b. Co                      | ppy the total claims fron                        | n Part 2 (nonpriority un                      | secured claims) from line 6j of S                                | Schedule E/F   | + \$83,331.29                   |
|                             |  |   |  | Your total liabilities   | \$92,753.29                     |
| Part 3:                     | Summarize You                                    | ır Income and Exp                             | enses  |  |                                 |
| <b>4.</b> Schedu<br>Copy yo | ule I: Your Income (Officiour combined monthly i | cial Form 106I)<br>ncome from line 12 of 9    | Schedule I   |  | \$2,336.41                      |
|                             | ıle J: Your Expenses (0                          |   |  |  |                                 |

Copy your monthly expenses from line 22c of Schedule J.....

\$3,427.00

| Debtor 1 |       | or 1 Yairelys Feria- Martinez Case num  | nber (if known)                              | _ |
|----------|-------|---|--|---|
| P        | art 4 | Answer These Questions for Administrative and Statistical Reco  | ords   | _ |
| 6.       | Are   | Are you filing for bankruptcy under Chapters 7, 11, or 13?  |  |   |
|          |       | No. You have nothing to report on this part of the form. Check this box and submit this form Yes  | form to the court with your other schedules. |   |
| 7.       | Wha   | What kind of debt do you have?  |  |   |
|          |       | Your debts are primarily consumer debts. Consumer debts are those "incurred by an family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purpose. | . , , ,                                      |   |
|          |       | Your debts are not primarily consumer debts. You have nothing to report on this part this form to the court with your other schedules.  | of the form. Check this box and submit       |   |
| 8.       |       | From the Statement of Your Current Monthly Income: Copy your total current monthly incomplificial Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.            | pme from \$2,336.50                          |   |
| 9.       | Cop   | Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:  |  |   |
|          |       |   | Total claim                                  |   |

# From Part 4 on *Schedule E/F*, copy the following:

|     | a conceans = 1 , cop, ag.  |   |        |
|-----|--|---|--------|
| 9a. | Domestic support obligations. (Copy line 6a.)  |   | \$0.00 |
| 9b. | Taxes and certain other debts you owe the government. (Copy line 6b.)  |   | \$0.00 |
| 9c. | Claims for death or personal injury while you were intoxicated. (Copy line 6c.)  |   | \$0.00 |
| 9d. | Student loans. (Copy line 6f.)   |   | \$0.00 |
| 9e. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) |   | \$0.00 |
| 9f. | Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)                                       | + | \$0.00 |
| 9g. | <b>Total.</b> Add lines 9a through 9f.   |   | \$0.00 |

|                                 |                   |                           |                                 | _   |
|---------------------------------|-------------------|---------------------------|---------------------------------|---|
| Fill in this inf                | ormation to i     | dentify your case         | :                               |   |
| Debtor 1                        | Yairelys          |                           | Feria- Martinez                 |   |
|                                 | First Name        | Middle Name               | Last Name                       |   |
| Debtor 2<br>(Spouse, if filing) | First Name        | Middle Name               | Last Name                       |   |
| , ,                             |                   | andras NODTHERN D         | ICTRICT OF TEVAC                |   |
|                                 | nkruptcy Court to | or the: <b>NORTHERN D</b> | ISTRICT OF TEXAS                |   |
| Case number<br>(if known)       |                   |                           |                                 | ☐ Check if this is an   |
| ,                               |                   |                           |                                 | amended filing  |
| Official Form                   | 106Dec            |                           |                                 |   |
| Declaration                     | About an I        | ndividual Debt            | or's Schedules                  | 12/15   |
| Sig                             | ın Below          |                           |                                 |   |
| Did you pay o                   | or agree to pay s | someone who is NOT        | an attorney to help you fill ou | t bankruptcy forms?   |
| <b>☑</b> No                     |                   |                           |                                 |   |
| Yes. Na                         | ame of person     |                           |                                 | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
| Under penalt<br>true and corr   |                   | eclare that I have read   | the summary and schedules       | filed with this declaration and that they are   |
| X /s/ Yairel                    | ys Feria- Marti   | inez                      | X                               |   |
|                                 | oria Martinoz De  |                           | Signature of Dobtor 2           | <del></del>   |

Date 01/22/2020

MM / DD / YYYY

Date

MM / DD / YYYY

| Fill in this in                                | formation to                                    | identify your            | case:      | Feria- Ma      | rtinez                       |  |                                    |                 |
|--|---|--------------------------|------------|----------------|------------------------------|--|------------------------------------|-----------------|
|  | First Name                                      | Middle Nam               | е          | Last Name      |                              |  |                                    |                 |
| Debtor 2<br>(Spouse, if filing                 | g) First Name                                   | Middle Nam               | e          | Last Name      |                              |  |                                    |                 |
| United States B                                | ankruptcy Court fo                              | or the: NORTHE           | EN DIST    | RICT OF T      | FYAS                         |  |                                    |                 |
|  | ankruptcy Court it                              | or tile. NONTIL          | IKIN DIST  | KICT OF T      | LXAG                         |  |                                    |                 |
| Case number (if known)                         |   |                          |            |                |                              |  | Check if this is an amended filing |                 |
| Official Forn                                  | n 107   |                          |            |                |                              |  |                                    |                 |
| Statement                                      | of Financia                                     | Affairs for              | r Indivi   | duals Fi       | ling for Ban                 | kruptcy                                  |                                    | 04/19           |
| 1. What is you  Married  Not man  During the I | r current marital<br>ried<br>last 3 years, have | status?                  | here othe  | r than where   | nere You Lived you live now? |  |                                    |                 |
| Debtor 1                                       | :   |                          | Dates I    | Debtor 1       | Debtor 2:                    |  | Dates<br>lived                     | Debtor 2        |
|  |   |                          |            |                | ☐ Same as I                  | Debtor 1                                 | □s                                 | ame as Debtor 1 |
| 1417 At  | kins Street                                     |                          | From       | 2014           |                              |  | From                               |                 |
| Number   | Street  |                          | To         | 2019           | Number Stree                 | t  | То                                 |                 |
| Cedar H  |   | X 75104<br>rate ZIP Code | _          |                | City                         | State ZIP                                | Code                               |                 |
| (Community                                     |   |                          | -          |                |                              | munity property sta<br>Nevada, New Mexic | -                                  | exas,           |
| ☑ No<br>☐ Yes. Ma                              | ake sure you fill ou                            | ıt Schedule H: Yo        | our Codebi | tors (Official | Form 106H).                  |  |                                    |                 |

| Debtor 1 Yairelys Feria- Martinez   |  |   | Case number (if known)   |  |  |  |  |
|---|--|---|--|--|--|--|--|
| Part 2: Explain the Sources of Your   |  |   | our Income   |  |  |  |  |
| 4.  | Fill in th   | I have any income from employne total amount of income you rece re filing a joint case and you have | ived from all jobs and all bu  | isinesses, including part                            | t-time activities.   | llendar years?                                       |  |
|   | _  |   | Debtor 1   |  | Debtor 2   |  |  |
|   |  |   | Sources of income<br>Check all that apply.   | Gross income<br>(before deductions<br>and exclusions | Sources of income<br>Check all that apply.   | Gross income<br>(before deductions<br>and exclusions |  |
|   |  | ry 1 of the current year until<br>l filed for bankruptcy:   | ☐ Wages, commissions, bonuses, tips☐ Operating a business  |  | ☐ Wages, commissions, bonuses, tips ☐ Operating a business                           |  |  |
| For the last calendar year:  (January 1 to December 31, 2019)   |  | •   | <ul><li>Wages, commissions, bonuses, tips</li><li>✓ Operating a business</li></ul>   | \$72,000.00 (est.)                                   | ☐ Wages, commissions, bonuses, tips ☐ Operating a business                           |  |  |
| For the calendar year before that:  (January 1 to December 31, 2018)  TYPY  5. Did you receive any other income durin |  | December 31, 2018 )   | <ul><li>Wages, commissions, bonuses, tips</li><li>✓ Operating a business</li><li>g this year or the two previous</li></ul> | \$16,900.00  | <ul><li>☐ Wages, commissions, bonuses, tips</li><li>☐ Operating a business</li></ul> |  |  |
|   | Did you receive any other income during this year or the two previous calendar years?<br>Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security; unemployment; and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are in a joint case and you have income that you received together, list it only once under Debtor 1. |   |  |  |  |  |  |
|   | <b>☑</b> No  | h source and the gross income fro   | m each source separately.  | Do not include income                                | that you listed in line 4.   |  |  |

| Debtor 1 |                               | Yairelys Feria- Martir  | nez  | Case number (if known)  |                    |  |  |  |  |
|----------|-------------------------------|---|--|---|--------------------|--|--|--|--|
|          |                               | List Certain Payments You Made Before You Filed for Bankruptcy  |  |   |                    |  |  |  |  |
| 6.       |                               | -   | 2's debts primarily consumer   |   |                    |  |  |  |  |
|          | □ No.                         |   | Debtor 2 has primarily consurual primarily for a personal, fam   | ner debts. Consumer debts are defined in 11 U ily, or household purpose."   | .S.C. § 101(8) as  |  |  |  |  |
|          |                               | During the 90 days bet  | fore you filed for bankruptcy, did   | you pay any creditor a total of \$6,825* or more?   |                    |  |  |  |  |
|          |                               | ☐ No. Go to line 7.   |  |   |                    |  |  |  |  |
|          |                               | total amount  | you paid that creditor. Do not in  | cotal of \$6,825* or more in one or more payments<br>iclude payments for domestic support obligations<br>de payments to an attorney for this bankruptcy c | s, such as         |  |  |  |  |
|          |                               | * Subject to adjustmen  | t on 4/01/22 and every 3 years   | after that for cases filed on or after the date of ac   | ljustment.         |  |  |  |  |
|          | <b>√</b> Yes                  | Debtor 1 or Debtor 2  | or both have primarily consun  | ner debts.  |                    |  |  |  |  |
|          |                               | During the 90 days bet  | fore you filed for bankruptcy, did   | you pay any creditor a total of \$600 or more?  |                    |  |  |  |  |
|          |                               | No. Go to line 7.   |  |   |                    |  |  |  |  |
|          |                               | creditor. Do  |  | total of \$600 or more and the total amount you partic support obligations, such as child support and for this bankruptcy case.                           |                    |  |  |  |  |
|          | corporating agent, in such as | ers include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; prations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing it, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations as child support and alimony.  Ido  Yes. List all payments to an insider. |  |   |                    |  |  |  |  |
| 8.       |                               | year before you filed fo  | r before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that<br>ninsider? |   |                    |  |  |  |  |
|          | Include                       | payments on debts guara   | nteed or cosigned by an insider  |   |                    |  |  |  |  |
|          | ✓ No<br>☐ Yes                 | List all payments that b  | enefited an insider.   |   |                    |  |  |  |  |
| Pa       | art 4:                        | Identify Legal Act  | ions, Repossessions, an  | d Foreclosures  |                    |  |  |  |  |
| 9.       | List all s                    |   | rsonal injury cases, small claim   | ty in any lawsuit, court action, or administrations actions, divorces, collection suits, paternity act  |                    |  |  |  |  |
|          | □ No ☑ Yes                    | . Fill in the details.  |  |   |                    |  |  |  |  |
| Cas      | e title                       |   | Nature of the case   | Court or agency   | Status of the case |  |  |  |  |
|          | Auto Fir<br>rtinez Ya         | nance, LLC vs Feria<br>airelvs  | Lawsuit  | In the District Court  Court Name   | Pending            |  |  |  |  |
|          |                               | 0.30  |  | 191st District Court  | On appeal          |  |  |  |  |
| Cas      | e number                      | DC 18-17273   | -  | Number Street  Dallas County texas  | Concluded          |  |  |  |  |
|          |                               |   |  | City State Z  | IP Code            |  |  |  |  |

| Deb | tor 1         | Yairelys Feria- Martinez   | Case number (if known)                           |
|-----|---------------|--|--|
| 10. | seized,       | 1 year before you filed for bankruptcy, was any of your property reported?  Il that apply and fill in the details below.                     | ssessed, foreclosed, garnished, attached,        |
|     |               | Go to line 11. s. Fill in the information below.   |  |
| 11. |               | 90 days before you filed for bankruptcy, did any creditor, including a les from your accounts or refuse to make a payment because you owe    |  |
|     | ✓ No<br>☐ Yes | s. Fill in the details.  |  |
| 12. |               | 1 year before you filed for bankruptcy, was any of your property in the<br>rs, a court-appointed receiver, a custodian, or another official? | e possession of an assignee for the benefit of   |
|     | ✓ No<br>☐ Yes | •  |  |
| Pá  | art 5:        | List Certain Gifts and Contributions   |  |
| 13. | Within        | 2 years before you filed for bankruptcy, did you give any gifts with a t   | otal value of more than \$600 per person?        |
|     | ✓ No<br>☐ Yes | s. Fill in the details for each gift.  |  |
| 14. |               | 2 years before you filed for bankruptcy, did you give any gifts or contr<br>charity?   | ributions with a total value of more than \$600  |
|     | ✓ No<br>☐ Yes | s. Fill in the details for each gift or contribution.  |  |
| Pá  | art 6:        | List Certain Losses  |  |
| 15. |               | 1<br>1 year before you filed for bankruptcy or since you filed for bankruptc<br>isaster, or gambling?  | y, did you lose anything because of theft, fire, |
|     | ✓ No<br>☐ Yes | s. Fill in the details.  |  |

| Debtor 1                                   |   | Yairelys F  | eria- M               | artinez                                 |   | Case number (if known)      |                       |            |  |  |
|--|---|---|-----------------------|---|---|-----------------------------|-----------------------|------------|--|--|
| P  | art 7:  | List Cer  | tain Pa               | ayments or                              | Transfers   |                             |                       |            |  |  |
| 16.  | <ol> <li>Within 1 year before you filed for bankr<br/>anyone you consulted about seeking banks</li> </ol> |   |                       |   |   |                             | or transfer any pro   | perty to   |  |  |
|  | Include   | any attorney                                      | s, bankr              | uptcy petition p                        | oreparers, or credit counseling   | agencies for services requi | red for your bankrupt | cy.        |  |  |
|  | □ No ✓ Yes  | s. Fill in the o                                  | letails.              |   |   |                             |                       |            |  |  |
| Allmand Law Firm, PLLC Person Who Was Paid |   | Description and value of any property transferred |                       | Date payment<br>or transfer was<br>made | Amount of payment   |                             |                       |            |  |  |
|  | <b>Airport</b>  | t Freeway,<br>eet                                 | Suite 4               | 101                                     | -   |                             | 2019                  | \$1,457.50 |  |  |
| Hui  | rst   |   | TX                    | 76054                                   | _   |                             |                       | -          |  |  |
| City                                       |   |   | State                 | ZIP Code                                |   |                             |                       |            |  |  |
| Ema  | il or websit  | e address   |                       |   | -   |                             |                       |            |  |  |
| Pers                                       | on Who M  | lade the Payme                                    | ent if Not            | You                                     | _   |                             |                       |            |  |  |
|  | Within anyone   | 1 year before<br>who promis                       | e you fil<br>sed to h | led for bankru<br>elp you deal v        | ptcy, did you or anyone else<br>with your creditors or to mak<br>t you listed on line 16. |                             |                       | perty to   |  |  |
|  | ✓ No<br>☐ Yes   | s. Fill in the c                                  | letails.              |   |   |                             |                       |            |  |  |
| 18.  |   | •   | -                     |   | ruptcy, did you sell, trade, or<br>rse of your business or finan                          | • •                         | operty to anyone, ot  | her than   |  |  |
|  |   | -   |                       |   | s made as security (such as gr<br>have already listed on this stat                        | -                           | or mortgage on your   | property). |  |  |
|  | ✓ No<br>☐ Yes   | s. Fill in the c                                  | letails.              |   |   |                             |                       |            |  |  |
| 19.  |   | •   | •                     |   | rruptcy, did you transfer any named asset-protection devices                              |                             | rust or similar devic | e of which |  |  |
|  | ✓ No<br>☐ Yes   | s. Fill in the c                                  | letails.              |   |   |                             |                       |            |  |  |

| Debtor 1           |                 | Yairelys Feria- Martinez  | Case number (if known)                         |
|--------------------|-----------------|---|--|
| P                  | art 8:          | List Certain Financial Accounts, Instruments, Safe Depo   | osit Boxes, and Storage Units                  |
| benefit<br>Include |                 | year before you filed for bankruptcy, were any financial accounts or iclosed, sold, moved, or transferred? checking, savings, money market, or other financial accounts; certificates of pension funds, cooperatives, associations, and other financial institutions. |  |
| 21.                | Do you          | . Fill in the details.  now have, or did you have within 1 year before you filed for bankrupto  | y, any safe deposit box or other depository    |
|                    | ✓ No<br>☐ Yes   | rities, cash, or other valuables?  Fill in the details.   |  |
| 22.                | <b>☑</b> No     | ou stored property in a storage unit or place other than your home with  Fill in the details.   | in 1 year before you filed for bankruptcy?     |
| P                  | art 9:          | Identify Property You Hold or Control for Someone Else  |  |
| 23.                | -               | hold or control any property that someone else owns? Include any pr in trust for someone.   | operty you borrowed from, are storing for,     |
|                    | ✓ No<br>☐ Yes   | . Fill in the details.  |  |
| P                  | art 10:         | Give Details About Environmental Information  |  |
| For                | the purp        | ose of Part 10, the following definitions apply:  |  |
| ı                  | nazardou        | nental law means any federal, state, or local statute or regulation conc<br>s or toxic substance, wastes, or material into the air, land, soil, surfac<br>statutes or regulations controlling the cleanup of these substances, w                                      | e water, groundwater, or other medium,         |
|                    |                 | ns any location, facility, or property as defined under any environment<br>or used to own, operate, or utilize it, including disposal sites.  | al law, whether you now own, operate, or       |
|                    |                 | <i>is material</i> means anything an environmental law defines as a hazardo<br>e, hazardous material, pollutant, contaminant, or similar item.  | ous waste, hazardous substance, toxic          |
| Rep                | ort all no      | otices, releases, and proceedings that you know about, regardless of w  | hen they occurred.                             |
| 24.                | Has any<br>law? | governmental unit notified you that you may be liable or potentially li   | able under or in violation of an environmental |
| 25.                | Have yo         | . Fill in the details.  ou notified any governmental unit of any release of hazardous material  . Fill in the details.  | ?  |

| Deb          | tor 1                | Yairelys Feria- Martinez  |                                     |                             | Cas             | se number    | (if known) _                    |             |                       |
|--------------|----------------------|---|-------------------------------------|-----------------------------|-----------------|--------------|---------------------------------|-------------|-----------------------|
| 26.          | Have you             | ou been a party in any judic  | ial or administrat                  | ive proceeding ur           | nder any envi   | ronmental    | law? Includ                     | de settlem  | nents and             |
|              | ✓ No<br>☐ Yes        | . Fill in the details.  |                                     |                             |                 |              |                                 |             |                       |
| Pa           | art 11:              | Give Details About Y  | our Business                        | or Connection               | s to Any E      | Business     |                                 |             |                       |
| 27.          | Within 4             | 4 years before you filed for ss?  | bankruptcy, did y                   | ou own a busines            | ss or have an   | y of the fo  | llowing con                     | nections t  | o any                 |
|              |                      | A sole proprietor or self-emp<br>A member of a limited liabili<br>A partner in a partnership<br>An officer, director, or mana<br>An owner of at least 5% of t | ity company (LLC)                   | or limited liability p      | oartnership (LI |              | or part-time                    |             |                       |
|              |                      | None of the above applies.  Check all that apply above  |                                     | ils below for each          | business.       |              |                                 |             |                       |
|              | arez Tru             |   | Describe the trucking cor           | nature of the busi<br>npany | ness            |              | er Identificati<br>nclude Socia |             | er<br>number or ITIN. |
|              | ess Name<br>7 Atkins | s Street  | Name of soci                        | untont ou bookke            |                 | EIN:         |                                 |             |                       |
| Numl         |                      |   | _ Name of acco                      | untant or bookkee           | eper            | Dates bu     | ısiness exist                   | ted         |                       |
|              |                      |   | _                                   |                             |                 | From         | 2014                            | То          | now                   |
| Ced          | lar Hill             | <b>TX 75104</b> State ZIP Code  | _                                   |                             |                 |              |                                 |             |                       |
|              | all finar  No        | 2 years before you filed for notal institutions, creditors,  . Fill in the details below.  Sign Below   |                                     | ou give a financia          | al statement t  | to anyone a  | about your t                    | ousiness?   | Include               |
| that<br>prop | answers<br>erty by   | the answers on this Statemes are true and correct. I und fraud in connection with a IU.S.C. §§ 152, 1341, 1519, a   | derstand that ma<br>bankruptcy case | king a false stater         | nent, concea    | ling prope   | rty, or obtaiı                  | ning mone   | ey or                 |
|              |                      | lys Feria- Martinez<br>Feria- Martinez, Debtor 1  | x                                   | Signature of Debto          | or 2            |              |                                 |             |                       |
|              | Date                 | 01/22/2020  |                                     | Date                        |                 |              |                                 |             |                       |
| Did          | you atta             | ch additional pages to Your   | Statement of Fir                    | ancial Affairs for          | Individuals F   | iling for Ba | ankruptcy (C                    | Official Fo | rm 107)?              |
|              |                      |   |                                     |                             |                 |              |                                 |             |                       |
| Did          | you pay              | or agree to pay someone w   | ho is not an atto                   | rney to help you f          | ill out bankru  | ptcy forms   | s?                              |             |                       |
| _            | No<br>Yes. Na        | me of person  |                                     |                             |                 |              |                                 | -           | Preparer's Notice,    |

| Fill in this inf                            | ormation to i                        | dentify your case:                          |   |  |   |
|---|--------------------------------------|---|---|--|---|
| Debtor 1                                    | Yairelys                             | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,     | Feria- Martinez   |  |   |
|   | First Name                           | Middle Name                                 | Last Name   |  |   |
| Debtor 2<br>(Spouse, if filing)             | First Name                           | Middle Name                                 | Last Name   |  |   |
| United States Ba                            | nkruptcy Court fo                    | or the: <b>NORTHERN D</b>                   | ISTRICT OF TEXAS  |  |   |
| Case number<br>(if known)                   |                                      |   |   |  | Check if this is an amended filing                  |
| Official Form                               | 108                                  |   |   |  |   |
| Statement o                                 | of Intention                         | for Individuals                             | Filing Under Chapt  | er 7   | 12/15   |
| If you are an indiv                         | vidual filing unde                   | er chapter 7, you must                      | fill out this form if:  |  |   |
| ■ creditors have                            | claims secured                       | by your property, or                        |   |  |   |
| ■ you have lease                            | ed personal prop                     | perty and the lease has                     | s not expired.  |  |   |
|   | hever is earlier,                    | •   | er you file your bankruptcy p<br>nds the time for cause. You n                                  | •  | •   |
| If two married peo<br>Both debtors mus      |                                      |   | both are equally responsible  | for supplying correct                                  | information.  |
| •   | •                                    | oossible. If more space and case number (if | e is needed, attach a separat<br>known).  | e sheet to this form.(                                 | On the top of any                                   |
| Part 1: Lis                                 | t Your Credit                        | ors Who Hold Sec                            | cured Claims  |  |   |
|   | itors that you lis<br>rmation below. | ted in Part 1 of Sched                      | lule D: Creditors Who Hold Cl   | aims Secured by Prop                                   | perty (Official Form 106D),                         |
| Identify the c                              | reditor and the                      | property that is collate                    | ral What do you inten-<br>property that secu  |  | Did you claim the property as exempt on Schedule C? |
| Creditor's name:                            | Conns Cred                           | lit Corp                                    | Surrender the Retain the pro  | property.<br>perty and redeem it.                      | □ No<br>□ Yes                                       |
| Description of<br>property<br>securing debt |                                      | shings                                      | Reaffirmation /   | perty and enter into a Agreement. Derty and [explain]: |   |
|   |                                      |   |   |  |   |
| Part 2: Lis                                 | t Your Unexp                         | oired Personal Pro                          | perty Leases  |  |   |
| fill in the informat                        | ion below. Do r                      | ot list real estate leas                    | ed in Schedule G: Executory<br>es. Unexpired leases are leas<br>operty lease if the trustee doe | ses that are still in effe                             |   |
| Describe you                                | ır unexnired ner                     | sonal property leases                       |   |  | Will this lease be assumed?                         |

None.

| Debtor 1   | Yairelys Feria- Martinez  |                       | Case number (if known)                            |
|------------|---|-----------------------|---|
| Part 3:    | Sign Below  |                       |   |
|            | penalty of perjury, I declare that I<br>al property that is subject to an u | •                     | any property of my estate that secures a debt and |
| X /s/ Yair | elys Feria- Martinez  | X                     |   |
| Yairelys   | Feria- Martinez, Debtor 1   | Signature of Debtor 2 |   |
| Date 0     | 1/22/2020   | Date                  |   |
| N          | MM / DD / YYYY  | MM / DD / YYY         | Y   |

B2030 (Form 2030) (12/15)

## UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF TEXAS FORT WORTH DIVISION

| In | re Yairelys Feria- Martinez                                  | Cas  | e No                                   |
|----|--|--|--|
|    |  | Cha  | pter <u>7</u>                          |
|    | DISCLOSURE OF  | COMPENSATION OF ATTORNEY   | FOR DEBTOR                             |
| 1. | that compensation paid to me within o                        | d. Bankr. P. 2016(b), I certify that I am the attorn<br>e year before the filing of the petition in bankrup<br>behalf of the debtor(s) in contemplation of or in | tcy, or agreed to be paid to me, for   |
|    | For legal services, I have agreed to ac                      | ept  | \$1,457.50                             |
|    | Prior to the filing of this statement I ha                   | e received   | \$1,457.50                             |
|    | Balance Due  |  | \$0.00                                 |
| 2. | The source of the compensation paid  ☑ Debtor □              | o me was:<br>Other (specify)   |  |
| 3. | The source of compensation to be pai                         | to me is:  |  |
|    | <b>☑</b> Debtor □  | Other (specify)  |  |
| 4. | I have not agreed to share the ab associates of my law firm. | ve-disclosed compensation with any other perso   | on unless they are members and         |
|    |  | disclosed compensation with another person or pof the agreement, together with a list of the name  |  |
| 5. | In return for the above-disclosed fee,                       | nave agreed to render legal service for all aspec  | ts of the bankruptcy case, including:  |
|    | a. Analysis of the debtor's financial sit bankruptcy;        | ation, and rendering advice to the debtor in dete  | ermining whether to file a petition in |
|    | b. Preparation and filing of any petitio                     | , schedules, statements of affairs and plan which  | n may be required;                     |
|    | c. Representation of the debtor at the                       | neeting of creditors and confirmation hearing, a   | nd any adjourned hearings thereof;     |

B2030 (Form 2030) (12/15)

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

Issues that arise that are not specifically listed in the Retainer

Discharge Proceeding brought by client, including those related to IRS debt, student loans or marital debt

Motions for relief, continuation, defense or enforcement of the Automatic Stay

**Motions to Redeem Personal Property** 

**Motions to Avoid Liens or Judgments** 

Other Contested matters, Discovery or Adversary Proceedings

Contested matters involving client's claim of exemptions

Filing any amendments to Clients' Schedules

Motions to continue the 341 meeting of creditors and/or appearing for a continued 341 hearing

Motions or adversary complaints to abandon/refinance/sell/purchase property;

Assisting in carrying out the Debtor's Statement of Intentions;

Monitoring an "asset case"

Re-opening a bankruptcy case to submit post-filing proof of pre-discharge counseling

Defense of Objection to Discharge or Motion to Dismiss Case

Negotiation, review and execution of Reaffirmation Agreement

Appearance at a hearing to prove up a Reaffirmation Agreement

Motions to Assume a contract or lease

**Dishonored or Cancelled ACH drafts** 

Missed or cancelled appointment/meeting Services related to case being selected for audit by the U.S. Trustee's Office

#### CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

01/22/2020 /s/ Weldon Reed Allmand

Date

Weldon Reed Allmand Allmand Law Firm, PLLC 860 Airport Freeway, Suite 401 Hurst, TX 76054

Phone: (214) 265-0123 / Fax: (214) 265-1979

Bar No. 24027134

/s/ Yairelys Feria- Martinez

Yairelys Feria- Martinez

### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF TEXAS FORT WORTH DIVISION

IN RE: Yairelys Feria- Martinez CASE NO

CHAPTER 7

## **VERIFICATION OF CREDITOR MATRIX**

|        | The above named Debtor hereby verifies that the | e attached l | list of creditors is true and correct to the best of his/her |
|--------|---|--------------|--|
| knowl  | edge.   |              |  |
|        |   |              |  |
|        |   |              |  |
|        |   |              |  |
| Date   | 1/22/2020                                       | Signature    | /s/ Yairelys Feria- Martinez                                 |
| Date . |   | Signature    | Yairelys Feria- Martinez                                     |
|        |   |              |  |
|        |   |              |  |

ADT Security Services 3190 S. Vaughn Way Aurora, CO 80014

AES/PHEAA Attn: Bankruptcy PO Box 2461 Harrisburg, PA 17105

Ally Financial 200 Renaissance Ctr Detroit, MI 48243

Attorney General of Texas Bankruptcy Collection Division PO Box 12017 Austin, TX 78711

Barclays Bank Delaware 125 S West St Wilmington, DE 19801

Capital One Bank USA N PO Box 85064 Richmond, VA 23285

Conns Credit Corp 3295 College St Beaumont, TX 77701

Credit One Bank NA Attn: Officer or Manager PO Box 98875 Las Vegas, NV 89193

Edc/fortune Real Prop 7810 N College Cir North Richland Hills, TX 76180 Fidelity Creditor Service Attn: Bankruptcy 441 North Varney Street Burbank, CA 91502

Fortiva Attn: Bankruptcy PO Box 105555 Atlanta, GA 30348

FORTIVAMC/MABTC/ATLS 30/40 GOLF LINKS ROAD Middletown, NY 10940

Genesis BC/Celtic Bank PO Box 84049 Columbus, GA 31908

Internal Revenue Service Centralized Insolvency Operations PO Box 21126 Philadelphia, PA 19114

LVNV Funding/Resurgent Capital Attn: Bankruptcy PO Box 10497 Greenville, SC 29603

Midland Funding Attn: Bankruptcy 350 Camino De La Reine Ste 100 San Diego, CA 92108

Portfolio Recovery Attn: Bankruptcy 120 Corporate Blvd Norfold, VA 23502

SYNCB/Toyrus PO Box 965005 Orlando, FL 32896 SYNCB/Walmart DC P.O. Box 965024 Orlando, FL 32896

TD Auto Finance Attn: Bankruptcy PO Box 9223 Farmington Hilss, MI 48333

Texas Alcoholic Beverage Comm Licences and Permits Division P.O. Box 13127 Austin, TX 78711-3127

United States Attorney - NORTH 3rd Floor, 1100 Commerce St. Dallas, TX 75242

US Attorney General US Department of Justice 950 Pennsylvania Ave, NW Washington, DC 20530

Yandy Alvarez 8004 Stowe Spring Lane Arlington, TX 76002

|                          | this information to i   | dentify your case  |  |   | e box only as direc<br>in Form 122A-1Su   |  |
|--------------------------|---|--|--|---|---|--|
| Debtor 1                 | Yairelys First Name   | Middle Name  | Feria- Martinez  Last Name   | 1. There is   | no presumption of abus  | e.   |
|                          | , if filing) First Name<br>tates Bankruptcy Court fo  | Middle Name<br>or the: <b>NORTHERN D</b>                               | Last Name DISTRICT OF TEXAS  | 2. The calc of abuse Means T                                  | ulation to determine if a<br>applies will be made ur<br>est Calculation (Official<br>ns Test does not apply | presumption<br>der Chapter 7<br>Form 122A-2).<br>now because |
| Case nui                 |   |  |  | of qualification  | ed military service but it  | could apply  |
|                          |   |  |  | ☐ Check if t  | his is an amended filing  |  |
| Official                 | Form 122A-1   |  |  |   |   |  |
|                          | _   | f Your Current   | Monthly Income   |   |   | 12/19  |
| military s               | ervice, complete and file pp) with this form.   | •  | ou do not have primarily cons<br>tion from Presumption of Abi  |   |   |  |
| 1. What                  | is your marital and filin   | g status? Check one  | only.  |   |   |  |
|                          | Not married. Fill out Colu  | umn A, lines 2-11.   |  |   |   |  |
|                          | Married and your spous  | e is filing with you. F  | Fill out both Columns A and B, li  | ines 2-11.  |   |  |
|                          | Married and your spous  | e is NOT filing with y   | ou. You and your spouse are  | ):  |   |  |
|                          | Living in the same  | household and are no   | ot legally separated. Fill out bo  | oth Columns A and   | d B, lines 2-11.  |  |
|                          | declare under penalt  | y of perjury that you ar   | d. Fill out Column A, lines 2-11<br>nd your spouse are legally sepa<br>is that do not include evading the  | arated under nonb   | ankruptcy law that applie   | es or that you   |
| bank<br>Augu<br>in the   | ruptcy case. 11 U.S.C. st 31. If the amount of your result. Do not include an   | § 101(10A). For examour monthly income value income amount more        | red from all sources, derived opple, if you are filing on Septeml ried during the 6 months, add the than once. For example, if be have nothing to report for any leading to the control of | ber 15, the 6-mon<br>ne income for all 6<br>oth spouses own t | th period would be Marc<br>months and divide the<br>he same rental property                                 | h 1 through<br>total by 6. Fill                              |
|                          |   |  |  | Column A  Debtor 1  | Column B  Debtor 2 or non-filing spouse   |  |
|                          | gross wages, salary, tipre all payroll deductions).   | os, bonuses, overtime  | e, and commissions   | \$0.00  | \$0.00  |  |
|                          | ony and maintenance pa<br>umn B is filled in.   | ayments. Do not inclu  | de payments from a spouse  | \$0.00  | \$0.00  |  |
| expe<br>regula<br>your o | mounts from any source<br>nses of you or your dep<br>ar contributions from an u<br>dependents, parents, and<br>buse only if Column B is n | endents, including cl<br>nmarried partner, men<br>roommates. Include i | nild support. Include<br>nbers of your household,<br>regular contributions from  | \$0.00  | \$0.00  |  |

on line 3.

| Yairelys Feria- Martinez  |   |  | c        | ase number (if k   | nown)                                   |
|---|---|--|----------|--------------------|---|
|   |   |  |          | Column A  Debtor 1 | Column B  Debtor 2 or non-filing spouse |
| Net income from operating a busine  | ess, profession,  | or farm  |          |                    |   |
|   | Debtor 1  | Debtor 2   |          |                    |   |
| Gross receipts (before all deductions)  | \$6,131.67  | \$0.00   |          |                    |   |
| Ordinary and necessary operating expenses   | \$3,795.17  | \$0.00   | Сору     |                    |   |
| Net monthly income from a business, profession, or farm   | \$2,336.50  | \$0.00   | here →   | \$2,336.50         | \$0.00                                  |
| Net income from rental and other re   | eal property  |  |          |                    |   |
|   | Debtor 1  | Debtor 2   |          |                    |   |
| Gross receipts (before all deductions)  | \$0.00  | \$0.00   |          |                    |   |
| Ordinary and necessary operating expenses   | \$0.00  | \$0.00   | Сору     |                    |   |
| Net monthly income from rental or other real property   | \$0.00  | \$0.00   |          | \$0.00             | \$0.00                                  |
| Interest, dividends, and royalties  |   |  |          | \$0.00             | \$0.00                                  |
| Unemployment compensation   |   |  |          | \$0.00             | \$0.00                                  |
| For your spouse  Pension or retirement income. Do was a benefit under the Social Securinext sentence, do not include any corallowance paid by the United States of  | not include any ar<br>ty Act. Also, exc<br>npensation, pens                               | \$0.0 \$0.0 \$0.0 \$0.0 \$0.0 \$0.0 \$0.0 \$0.0  | 00       | \$0.00             | \$0.00                                  |
| disability, combat-related injury or dis<br>uniformed services. If you received a<br>of title 10, then include that pay only t<br>amount of retired pay to which you wo<br>under any provision of title 10 other th   | ability, or death or<br>any retired pay pa<br>so extent that it do<br>ould otherwise be   | f a member of the<br>id under chapter 61<br>es not exceed the<br>entitled if retired             |          |                    |   |
| O. Income from all other sources not I amount. Do not include any benefits payments received as a victim of a winternational or domestic terrorism; or or allowance paid by the United State disability, combat-related injury or dis uniformed services. If necessary, list and put the total below. | received under the ar crime, a crime, compensation, ps Government in ability, or death or | ne Social Security A against humanity, on ension, pay, annuity connection with a famember of the | ct;<br>r |                    |   |
| Total amounts from separate pages,  | if any.   |  | <br>     |                    | +                                       |

| Debtor 1 Yairelys Feria- Martinez |  | Case number (if known)           |   |
|-----------------------------------|--|----------------------------------|---|
|                                   | Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column to the to |                                  | Column A Debtor 1 Debtor 2 or non-filing spouse  \$2,336.50  + \$0.00  \$2,336.50  Total current monthly income |
| 12.                               | Calculate your current monthly income for the year   | ear. Follow these steps:         |   |
|                                   | 12a. Copy your total current monthly income from   | line 11                          | Copy line 11 here -> 12a. \$2,336.50  |
|                                   | Multiply by 12 (the number of months in a yea  | ar).                             | X 12  |
|                                   | 12b. The result is your annual income for this part  | of the form.                     | 12b. <b>\$28,038.00</b>   |
| 13.                               | Calculate the median family income that applies  | to you. Follow these steps:      |   |
|                                   | Fill in the state in which you live.   | Texas                            |   |
|                                   | Fill in the number of people in your household.  | 5                                |   |
|                                   | Fill in the median family income for your state and s  | ize of household                 | 13. \$93,724.00   |
|                                   | To find a list of applicable median income amounts, instructions for this form. This list may also be avail  |                                  | •   |
| 14.                               | How do the lines compare?  |                                  |   |
|                                   | 14a. Line 12b is less than or equal to line 13.  |                                  | pox 1, There is no presumption of abuse.  |
|                                   | Go to Part 3. Do NOT fill out or file Offic  14b. Line 12b is more than line 13. On the to Go to Part 3 and fill out Form 122A-2.  |                                  | presumption of abuse is determined by Form 122A-2.  |
|                                   |  |                                  |   |
| P                                 | art 3: Sign Below  |                                  |   |
|                                   | By signing here, I declare under penalty of perjury  | that the information on this sta | atement and in any attachments is true and correct.   |
|                                   | X /s/ Yairelys Feria- Martinez Yairelys Feria- Martinez, Debtor 1  | <b>X</b>                         | ature of Debtor 2   |
|                                   | Date 1/22/2020<br>MM / DD / YYYY   | Date                             | MM / DD / YYYY  |
|                                   | If you checked line 14a, do NOT fill out or file Form  | n 122A-2.                        |   |
|                                   | If you checked line 14b, fill out Form 122A-2 and f  | ile it with this form.           |   |